

County: Abbeville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ABBEVILLE NURSING HOME 83 THOMSON CIR ABBEVILLE, SC 29620-0190 FAC.#:864-366-5122 HUGHES SR, ALAN L PH#: 864-366-5122 Facility Email: ABBNH@WCTEL.NET	Abbeville / Corporation PO BOX 190 ABBEVILLE, SC 29620-0190 ABBEVILLE NURSING HOME INC NCF-0266 / 12/31/2009	94
Licensed Beds Nursing Home 94 Institutional Nursing Home 0		

Certifications:None

CARLISLE NURSING CENTER 18 DR FRANK PRESSLY DR DUE WEST, SC 29639 FAC.#:864-379-2570 PRIDMORE, R PAUL PH#: 864-379-3210 Facility Email: PPRIDMORE@COVENANTWAY.ORG	Abbeville / Non-Profit Corporation PO BOX 307 DUE WEST, SC 29639-0307 COVENANT WAY NCF-0775 / 06/30/2010	22
Licensed Beds Nursing Home 22 Institutional Nursing Home 0		

Certifications:Alzheimer Care

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 116
Number of Activities/Facilities licensed in county of	Abbeville	# Lics 2
	Number Licensed Units :	116

County: Aiken

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
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AZALEA WOODS 123 DUPONT DR NE AIKEN, SC 29801-4001 FAC.#:803-648-0434 ARMSTRONG, TIM E PH#: 803-648-0434 Facility Email: No Facility Email on Record	Aiken / Corporation 123 DUPONT DR NE AIKEN, SC 29801-4001 AIKEN NURSING HOME INC NCF-0938 / 12/31/2009	86
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Licensed Beds	Nursing Home	86	Institutional Nursing Home	0
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Certifications:None

CARRIAGE HILLS LIVING CENTER 550 EASTGATE DR AIKEN, SC 29803-7688 FAC.#:803-643-3694 BOWLES JR, ROBERT F PH#: 803-643-3694 Facility Email: JSWIFT@HMR-LTC.COM	Aiken / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 CARRIAGE HILLS LIVING CENTER LLC NCF-0902 / 09/30/2010	60
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Licensed Beds	Nursing Home	60	Institutional Nursing Home	0
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Certifications:None

NHC HEALTHCARE NORTH AUGUSTA 350 AUSTIN GRAYBILL RD NORTH AUGUSTA, SC 29860-9251 FAC.#:803-278-4272 HILL, HEATH E PH#: 803-278-4272 Facility Email: HEATHH@NHCNORTHAUGUSTA.COM	Aiken / Ltd. Liability PO BOX 7979 NORTH AUGUSTA, SC 29861-7979 NHC HEALTHCARE/NORTH AUGUSTA LLC NCF-0799 / 06/30/2010	192
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Licensed Beds	Nursing Home	192	Institutional Nursing Home	0
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Certifications:None

PEPPER HILL NURSING & REHAB CENTER 3525 AUGUSTUS RD AIKEN, SC 29801-2701 FAC.#:803-642-8376 JONES, PRESTON S PH#: 803-642-8376 Facility Email: ROXANNEWEESE@PEPPERHILL.COM	Aiken / Limited Liability PO BOX 3188 AIKEN, SC 29802-3188 PEPPER HILL NURSING & REHAB CENTER LLC NCF-0879 / 11/30/2009	132
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Licensed Beds	Nursing Home	132	Institutional Nursing Home	0
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Certifications:Alzheimer Unit

UNIHEALTH POST ACUTE CARE-AIKEN 830 LAURENS ST AIKEN, SC 29801-0475 FAC.#:803-649-6264 HAY, WINONA MICHELLE PH#: 803-649-6264 Facility Email: MHAY@UHS-PRUITT.COM	Aiken / Limited Liability 830 LAURENS ST AIKEN, SC 29801-0475 UNIHEALTH POST ACUTE CARE-AIKEN LLC NCF-0942 / 06/30/2010	176
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Licensed Beds	Nursing Home	176	Institutional Nursing Home	0
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Certifications:Alzheimer Unit, Alzheimers Care

County: Aiken

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
UNIHEALTH POST ACUTE CARE-NORTH AUGUSTA	Aiken / Limited Liability	132
1200 TALISMAN DR	1200 TALISMAN DR	
NORTH AUGUSTA, SC 29841-4098 FAC.#:803-278-2170	NORTH AUGUSTA, SC 29841-4098	
CARLISLE, CAROL A PH#: 803-278-0011	UNIHEALTH POST ACUTE CARE-NORTH AUGUSTA LLC	
Facility Email: No Facility Email on Record	NCF-0721 / 10/31/2010	

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	6	Number Licensed Units 778
Number of Activities/Facilities licensed in county of	Aiken	# Lics 6
	Number Licensed Units :	778

County: Allendale

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
JOHN EDWARD HARTER NURSING CENTER	Allendale / County	44
185 REVOLUTIONARY TRL	PO BOX 218	
FAIRFAX, SC 29827-7105 FAC.#:803-632-3334	FAIRFAX, SC 29827-0218	
HIATT, MELVIN K PH#: 803-632-3334	ALLENDALE COUNTY HOSPITAL	
Facility Email: ADMINKH@ACHOSPITAL.ORG	NCF-0259 / 04/30/2010	
Licensed Beds Nursing Home 44	Institutional Nursing Home 0	

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="44"/>
Number of Activities/Facilities licensed in county of	Allendale	# Lics	1
	Number Licensed Units :	44	

County: Anderson

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
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ANDERSON PLACE 311 SIMPSON RD ANDERSON, SC 29621-2157 FAC.#:864-261-3875 HUNTER, ANDREA M PH#: 864-261-3875 Facility Email: ANDERSONPLACE-ED@EMERITUS.COM	Anderson / Corporation 311 SIMPSON RD ANDERSON, SC 29621-2157 EMERITUS CORPORATION NCF-0872 / 03/31/2010	44
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Licensed Beds Nursing Home 44 Institutional Nursing Home 0

Certifications:Alzheimer Care

BROOKSIDE LIVING CENTER 208 JAMES ST ANDERSON, SC 29625-2942 FAC.#:864-226-3427 KING, JIMMY PH#: 864-226-3427 Facility Email: JSWIFT@HMR-LTC.COM	Anderson / Limited Liability Company (multiple member) 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 BROOKSIDE LIVING CENTER LLC NCF-0909 / 09/30/2010	88
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Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

ELLENBURG NURSING CENTER 611 E HAMPTON ST ANDERSON, SC 29624-2899 FAC.#:864-226-5054 ELLENBURG, LYNDON W PH#: 864-226-5054 Facility Email: FUZZERONE@AOL.COM	Anderson / Corporation 611 E HAMPTON ST ANDERSON, SC 29624-2899 ELLENBURG NURSING CENTER INC NCF-0231 / 03/31/2010	181
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Licensed Beds Nursing Home 181 Institutional Nursing Home 0

Certifications:None

NHC HEALTHCARE ANDERSON 1501 E GREENVILLE ST ANDERSON, SC 29621-2004 FAC.#:864-226-8356 MOORHOUSE, BRADLEY W PH#: 864-226-8356 Facility Email: SNFCARE@NHCANDERSON.COM	Anderson / Ltd. Liability PO BOX 1327 ANDERSON, SC 29622-1327 NHC HEALTHCARE/ANDERSON LLC NCF-0801 / 06/30/2010	290
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Licensed Beds Nursing Home 290 Institutional Nursing Home 0

Certifications:Alzheimer Care

RICHARD M CAMPBELL VETERANS NURSING HOME 4605 BELTON HWY ANDERSON, SC 29621-5045 FAC.#:864-261-6734 AUSTIN, RUBERT E PH#: 864-261-6734 Facility Email: RAUSTIN@HMR-LTC.COM	Anderson / State 4605 BELTON HWY ANDERSON, SC 29621-5045 SC DEPARTMENT OF MENTAL HEALTH NCF-0549 / 02/28/2010	220
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Licensed Beds Nursing Home 220 Institutional Nursing Home 0

Certifications:Alzheimer Unit

County: Anderson

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
RIVERSIDE LIVING CENTER 109 BENTZ RD PIEDMONT, SC 29673-1412 FAC.#:864-845-5177 PARSON, DIANE PH#: 864-845-5177 Facility Email: JSWIFT@HMR-LTC.COM	Anderson / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 RIVERSIDE LIVING CENTER LLC NCF-0907 / 09/30/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

WILLOW CREEK LIVING CENTER 406 W BROAD ST IVA, SC 29655-9765 FAC.#:864-348-7433 HERITAGE, CARLA PH#: 864-348-7433 Facility Email: JSWIFT@HMR-LTC.COM	Anderson / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 WILLOW CREEK LIVING CENTER LLC NCF-0904 / 09/30/2010	60
Licensed Beds Nursing Home 60 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	<input type="text" value="7"/>	Number Licensed Units <input type="text" value="971"/>
Number of Activities/Facilities licensed in county of Anderson	# Lics	7
	Number Licensed Units :	971

County: Bamberg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
UNIHEALTH POST-ACUTE CARE OF BAMBERG 439 NORTH ST BAMBERG, SC 29003-1317 FAC.#:803-245-6227 VALLENTINE, TERESA C PH#: 803-245-4321 Facility Email: No Facility Email on Record	Bamberg / Limited Liability 439 NORTH ST BAMBERG, SC 29003-1317 UNIHEALTH POST-ACUTE CARE OF BAMBERG LLC NCF-0322 / 08/31/2010	88

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	1	Number Licensed Units 88
Number of Activities/Facilities licensed in county of	Bamberg	# Lics 1
	Number Licensed Units :	88

County: Barnwell

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BARNWELL COUNTY NURSING HOME 31 WREN ST BARNWELL, SC 29812-1528 FAC.#:803-259-5547 PORTER, NANCY PH#: 803-259-5547 Facility Email: NANCY@BARNWELLNURSING.COM	Barnwell / County 31 WREN ST BARNWELL, SC 29812-1528 BARNWELL COUNTY NCF-0893 / 04/30/2010	44
Licensed Beds Nursing Home 44 Institutional Nursing Home 0		

Certifications:None

LAUREL BAYE HEALTHCARE OF BLACKVILLE 1612 JONES BRIDGE RD BLACKVILLE, SC 29817-3066 FAC.#:803-284-4313 BROADFOOT, BOB PH#: 803-284-4313 Facility Email: BBROADFOOT@LAURELBAYE.COM	Barnwell / Ltd. Liability 1612 JONES BRIDGE RD BLACKVILLE, SC 29817-3066 LAUREL BAYE HEALTHCARE OF BLACKVILLE LLC NCF-0755 / 08/31/2010	85
Licensed Beds Nursing Home 85 Institutional Nursing Home 0		

Certifications:None

LAUREL BAYE HEALTHCARE OF WILLISTON 5721 SPRINGFIELD RD WILLISTON, SC 29853-1917 FAC.#:803-266-3229 GUZMAN, CHARLES N PH#: 803-531-7771 Facility Email: KDERRICK@LAURELBAYE.COM	Barnwell / Ltd. Liability PO BOX 250 WILLISTON, SC 29853-0250 LAUREL BAYE HEALTHCARE OF WILLISTON LLC NCF-0754 / 08/31/2010	44
Licensed Beds Nursing Home 44 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units <input type="text" value="173"/>
Number of Activities/Facilities licensed in county of	Barnwell	# Lics 3
	Number Licensed Units :	173

County: Beaufort**Facility Type: Nursing Home**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BAYVIEW MANOR 11 TODD DR BEAUFORT, SC 29902-6113 FAC.#:864-703-5100 STEVENS, SHEILA PH#: 843-524-8911 Facility Email: ADMIN@BAYVIEWMANOR.NET	Beaufort / Ltd. Liability PO BOX 1103 BEAUFORT, SC 29901-1103 BAYVIEW MANOR LLC NCF-0898 / 05/31/2010	170
Licensed Beds	Nursing Home 170 Institutional Nursing Home 0	

Certifications:None

BROAD CREEK A CLASSIC RESIDENCE BY HYATT CARE CENTER 801 LEMON GRASS CT HILTON HEAD ISLAND, SC 29928-3022 FAC.#:843-341-7300 JOHNSON, STEPHANI PH#: 843-341-7300 Facility Email: SJOHNSON@HYATTCLASSIC.COM	Beaufort / Corporation 700 TIDEPOINTE WAY HILTON HEAD ISLAND, SC 29928-3040 CC-HILTON HEAD INC NCF-0753 / 07/31/2010	25
Licensed Beds	Nursing Home 25 Institutional Nursing Home 0	

Certifications:Alzheimer Care

FRASER HEALTH CARE 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 FAC.#:843-842-3747 MILLER, LINDA D PH#: 843-842-3747 Facility Email: LMILLER@HARGRAY.COM	Beaufort / Corporation 300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4682 SEABROOK OF HILTON HEAD INC NCF-0414 / 09/30/2010	33
Licensed Beds	Nursing Home 19 Institutional Nursing Home 14	

Certifications:None

LIFE CARE CENTER OF HILTON HEAD 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 FAC.#:843-681-6006 HARDY JR, JAMES M PH#: 843-681-6006 Facility Email: No Facility Email on Record	Beaufort / Corporation 120 LAMOTTE DR HILTON HEAD ISLAND, SC 29926-2792 LIFE CARE CENTERS OF AMERICA INC NCF-0725 / 05/31/2010	88
Licensed Beds	Nursing Home 88 Institutional Nursing Home 0	

Certifications:None

PRESTON HEALTH CENTER 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 FAC.#:843-689-7077 ELLIOTT, AMANDA J PH#: 843-689-7077 Facility Email: AELLIOTT@THECYPRESS.COM	Beaufort / Limited Liability Limited Partnership 87 BIRDSONG WAY HILTON HEAD ISLAND, SC 29926-1365 CYPRESS OF HILTON HEAD ISLAND ASSOCIATES LP NCF-0576 / 04/30/2010	77
Licensed Beds	Nursing Home 69 Institutional Nursing Home 8	

Certifications:Alzheimer Unit

County: Beaufort

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	5
Number Licensed Units	393

Number of Activities/Facilities licensed in county of	Beaufort	# Lics	5
	Number Licensed Units :	393	

County: Berkeley

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HEARTLAND HEALTH CARE CENTER-CHARLESTON 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 FAC.#:843-553-0656 COURY, WILLIAM V PH#: 843-553-0656 Facility Email: 4015-ADMIN@HCR-MANORCARECOM	Berkeley / Limited Liability 1800 EAGLE LANDING BLVD HANAHAN, SC 29410-8517 HEARTLAND-CHARLESTON OF HANAHAN SC LLC NCF-0526 / 12/31/2009	105
Licensed Beds Nursing Home 105 Institutional Nursing Home 0		

Certifications:None

LAKE MOULTRIE NURSING HOME 1038 MCGILL LN SAINT STEPHEN, SC 29479-3196 FAC.#:843-567-2307 DRIGGERS, JOANN C PH#: 843-567-2307 Facility Email: JDRIGGERS@CLARENDONHEALTH.COM	Berkeley / Non-Profit Corporation PO BOX 1108 SAINT STEPHEN, SC 29479-1108 CLARENDON HOSPITAL DISTRICT NCF-0738 / 12/31/2009	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

UNIHEALTH POST ACUTE CARE-MONCKS CORNER 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 FAC.#:843-761-8368 MCKINSTRY, NANCY W PH#: 000-000-0000 Facility Email: THENSCHL@UHS-PRUITT.COM	Berkeley / Limited Liability 505 S LIVE OAK DR MONCKS CORNER, SC 29461-3554 UNIHEALTH POST ACUTE CARE-MONCKS CORNER LLC NCF-0943 / 10/31/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units	<input type="text" value="325"/>
Number of Activities/Facilities licensed in county of	Berkeley	# Lics	3
	Number Licensed Units :	325	

County: Calhoun

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CALHOUN CONVALESCENT CENTER 601 DANTZLER ST SAINT MATTHEWS, SC 29135-1522 FAC.#:803-655-7101 KIZER, MELISSA R PH#: 803-655-7101	Calhoun / Corporation PO BOX 157 SAINT MATTHEWS, SC 29135-0157 CALHOUN CONVALESCENT CENTER INC NCF-0505 / 01/31/2010	120
Facility Email: No Facility Email on Record		
Licensed Beds Nursing Home	120	Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	1	Number Licensed Units	120
Number of Activities/Facilities licensed in county of	Calhoun	# Lics	1
		Number Licensed Units :	120

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BISHOP GADSDEN EPISCOPAL HEALTH CARE CENTER 3 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3500 FAC.#:843-762-3300 TRAWICK, C WILLIAM PH#: 843-762-3300 Facility Email: BILL.TRAWICK@BISHOPGADSDEN.ORG	Charleston / Non-Profit Corporation 1 BISHOP GADSDEN WAY CHARLESTON, SC 29412-3501 EPISCOPAL CHURCH HOME NCF-0577 / 04/30/2010	50
Licensed Beds	Nursing Home 41 Institutional Nursing Home 9	
Certifications:None		
DRIFTWOOD REHABILITATION AND NURSING CENTER 2375 BAKER HOSPITAL BLVD NORTH CHARLESTON, SC 29405-8291 FAC.#:843-744-2750 THOMAS, JAMES G PH#: 843-744-2750 Facility Email: JIM.THOMAS@THICARECOM	Charleston / Ltd. Liability 2375 BAKER HOSPITAL BLVD NORTH CHARLESTON, SC 29405-8291 THI OF SOUTH CAROLINA AT CHARLESTON LLC NCF-0870 / 08/31/2010	160
Licensed Beds	Nursing Home 160 Institutional Nursing Home 0	
Certifications:None		
FRANKE HEALTH CARE CENTER 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 FAC.#:843-856-4700 STOLL, SANDRA A PH#: 843-856-4700 Facility Email: SSTOLL@FRANKEATSEASIDE.ORG	Charleston / Non-Profit Corporation 1885 RIFLE RANGE RD MOUNT PLEASANT, SC 29464-9440 LUTHERAN HOMES OF SOUTH CAROLINA INC NCF-0800 / 07/31/2010	44
Licensed Beds	Nursing Home 24 Institutional Nursing Home 20	
Certifications:None		
GRACE HALL REHABILITATION 1010 LAKE HUNTER CIR MOUNT PLEASANT, SC 29464-5417 FAC.#:843-388-2030 DEFOOR, KENNETH E PH#: 843-388-2030 Facility Email: KDEFOOR@SDBELL.COM	Charleston / Corporation 1010 LAKE HUNTER CIR MOUNT PLEASANT, SC 29464-5417 SAVANNAH GRACE HALLS LP NCF-0926 / 12/31/2009	42
Licensed Beds	Nursing Home 42 Institutional Nursing Home 0	
Certifications:None		
HEARTLAND OF WEST ASHLEY REHABILITATION AND NURSING CENTER 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 FAC.#:843-763-0233 MCDANIEL, WILLIAM J PH#: 843-763-0233 Facility Email: 531ADMIN@HCR-MANORCARECOM	Charleston / Limited Liability 1137 SAM RITTENBERG BLVD CHARLESTON, SC 29407-3370 WEST ASHLEY REHABILITATION AND NURSING CENTER - CHARLESTON SC LLC NCF-0413 / 12/31/2009	99
Licensed Beds	Nursing Home 99 Institutional Nursing Home 0	
Certifications:None		

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ISLAND OAKS LIVING CENTER 3647 MAYBANK HWY JOHNS ISLAND, SC 29455-4825 FAC.#:843-559-5888 BYRUM, DENA BYRD PH#: 864-269-3725 Facility Email: JSWIFT@HMR-LTC.COM	Charleston / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 ISLAND OAKS LIVING CENTER LLC NCF-0911 / 09/30/2010	132
Licensed Beds	Nursing Home 132 Institutional Nursing Home 0	

Certifications:None

LIFE CARE CENTER OF CHARLESTON 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 FAC.#:843-764-3500 CLIETT, BETH A PH#: 843-764-3500 Facility Email: No Facility Email on Record	Charleston / Ltd. Liability 2600 ELMS PLANTATION BLVD NORTH CHARLESTON, SC 29406-9180 CHARLESTON MEDICAL INVESTORS LLC NCF-0878 / 11/30/2009	148
Licensed Beds	Nursing Home 148 Institutional Nursing Home 0	

Certifications:Alzheimer Unit, Alzheimers Care

MOUNT PLEASANT MANOR 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 FAC.#:843-884-8903 WHITE, BRUCE L PH#: 843-884-8903 Facility Email: BWHITE@MOUNTPLEASANTMANOR.COM	Charleston / Ltd. Liability 921 BOWMAN RD MOUNT PLEASANT, SC 29464-3234 MOUNT PLEASANT MANOR LLC NCF-0896 / 05/31/2010	132
Licensed Beds	Nursing Home 132 Institutional Nursing Home 0	

Certifications:None

NHC HEALTHCARE CHARLESTON 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 FAC.#:843-766-5228 ATKINSON, ANGELA PH#: 843-766-5228 Facility Email: ANGATK@GMAIL.COM	Charleston / Limited Liability 2230 ASHLEY CROSSING DR CHARLESTON, SC 29414-5700 NHC HEALTHCARE-CHARLESTON LLC NCF-0871 / 09/30/2010	132
Licensed Beds	Nursing Home 132 Institutional Nursing Home 0	

Certifications:None

SANDPIPER REHAB & NURSING 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 FAC.#:843-881-3210 HADLEY, ERIC T PH#: 843-884-5735 Facility Email: EHADLEY@PREMIERSL.COM	Charleston / Corporation 1049 ANNA KNAPP BLVD MOUNT PLEASANT, SC 29464-3133 SANDPIPER REHAB & NURSING LLC NCF-0876 / 08/31/2010	176
Licensed Beds	Nursing Home 176 Institutional Nursing Home 0	

Certifications:None

County: Charleston

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
WHITE OAK MANOR-CHARLESTON 9319 MEDICAL PLAZA DR CHARLESTON, SC 29406-9194 FAC.#:843-797-8282 WALKER, RUTH P PH#: 843-797-8282	Charleston / Corporation 9285 MEDICAL PLAZA DR CHARLESTON, SC 29406-9126 WHITE OAK MANOR-CHARLESTON INC NCF-0892 / 12/31/2009	176

Facility Email: No Facility Email on Record

Licensed Beds Nursing Home 176 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="11"/>	Number Licensed Units	<input type="text" value="1,291"/>
Number of Activities/Facilities licensed in county of	Charleston	# Lics	11
	Number Licensed Units :	1,291	

County: Cherokee

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

BROOKVIEW HEALTHCARE CENTER	Cherokee / Ltd. Liability	132
510 THOMPSON ST	510 THOMPSON ST	
GAFFNEY, SC 29340-3620 FAC.#:864-489-3101	GAFFNEY, SC 29340-3620	
SAIN, SUSAN H PH#: 864-489-3101	PALMETTO BROOKVIEW OPERATING LLC	
Facility Email: ADMIN.BRGA.SC@PALMETTOLTC.COM	NCF-0931 / 09/30/2010	

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

CHEROKEE COUNTY LONG TERM CARE FACILITY	Cherokee / County	111
1434 N LIMESTONE ST	1434 N LIMESTONE ST	
GAFFNEY, SC 29340-4798 FAC.#:864-487-2717	GAFFNEY, SC 29340-4798	
MATTHEWS, CINDY PH#: 864-487-2717	CHEROKEE COUNTY	
Facility Email: No Facility Email on Record	NCF-0323 / 11/30/2009	

Licensed Beds Nursing Home 111 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	2
Number Licensed Units	243

Number of Activities/Facilities licensed in county of Cherokee	# Lics	2
Number Licensed Units :	243	

County: Chester

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CHESTER NURSING CENTER 1 MEDICAL PARK DR CHESTER, SC 29706-9776 FAC.#:803-581-3151 PARKER, EDWARD SPENCER PH#: 803-581-3151 Facility Email: SPENCER.PARKER@HMA.ORG	Chester / Corporation 1 MEDICAL PARK DR CHESTER, SC 29706-9776 CHESTER HMA INC NCF-0895 / 09/30/2009 (Renewal Pending)	100

Licensed Beds Nursing Home 100 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed: <input type="text" value="1"/>	Number Licensed Units <input type="text" value="100"/>

Number of Activities/Facilities licensed in county of	Chester	# Lics	1
	Number Licensed Units :	100	

County: Chesterfield

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CHERAW HEALTHCARE 400 MOFFAT DR CHERAW, SC 29520-3048 FAC.#:843-537-5253 DYSON, JOEL W PH#: 843-537-5253 Facility Email: INFO@CHERAWHC.COM	Chesterfield / Corporation PO BOX 967 CHERAW, SC 29520-0967 CHERAW HEALTHCARE INC NCF-0951 / 04/30/2010	120
Licensed Beds Nursing Home 120 Institutional Nursing Home 0		

Certifications:Alzheimer Care

CHESTERFIELD CONVALESCENT CENTER 1150 STATE RD CHERAW, SC 29520-2048 FAC.#:843-537-2060 TUCKER, RANDY PH#: 843-537-2060 Facility Email: No Facility Email on Record	Chesterfield / Corporation PO BOX 1329 CHERAW, SC 29520-1329 CHESTERFIELD CONVALESCENT CENTER INC NCF-0552 / 03/31/2010	104
Licensed Beds Nursing Home 104 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	2	Number Licensed Units	224
Number of Activities/Facilities licensed in county of	Chesterfield	# Lics	2
	Number Licensed Units :		224

County: Clarendon

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

LAKE MARION NURSING FACILITY	Clarendon / Non-Profit Corporation	88
1527 URBANA RD	PO BOX 1159	
SUMMERTON, SC 29148-8929 FAC.#:803-485-2317	SUMMERTON, SC 29148-1159	
MCLEOD, MARY W PH#: 803-485-2317	CLARENDON HOSPITAL DISTRICT	
Facility Email: LMCLEOD@CLARENDONHEALTH.COM	NCF-0736 / 01/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

WINDSOR MANOR	Clarendon / Non-Profit Corporation	64
5583 SUMMERTON HWY	PO BOX 1230	
MANNING, SC 29102-5217 FAC.#:803-478-2323	SUMMERTON, SC 29148-1230	
MILES, ANETTE C PH#: 803-478-2323	CLARENDON HOSPITAL DISTRICT	
Facility Email: AMILES@CLARENDONHEALTH.COM	NCF-0737 / 01/31/2010	

Licensed Beds Nursing Home 64 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	Number Licensed Units
2	152

Number of Activities/Facilities licensed in county of	Clarendon	# Lics	2
	Number Licensed Units :	152	

County: Colleton

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HERITAGE HEALTHCARE OF WALTERBORO 401 WITSELL ST WALTERBORO, SC 29488-3052 FAC.#:843-549-5546 STEPHENSON, REBECCA S PH#: 843-549-5546 Facility Email: RESTEPHENSON@UHS-PRUITT.COM	Colleton / Ltd. Liability 401 WITSELL ST WALTERBORO, SC 29488-3052 HERITAGE HEALTHCARE OF WALTERBORO LLC NCF-0949 / 10/31/2009 (Renewal Pending)	132

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

VETERANS VICTORY HOUSE 2461 SIDNEYS RD WALTERBORO, SC 29488-6783 FAC.#:843-538-3000 NEWTON, LEEANNE B PH#: 843-538-3000 Facility Email: LNEWTON@HMR-LTC.COM	Colleton / State 2461 SIDNEYS RD WALTERBORO, SC 29488-6783 SC DEPARTMENT OF MENTAL HEALTH NCF-0921 / 10/31/2009 (Renewal Pending)	220
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Licensed Beds Nursing Home 220 Institutional Nursing Home 0

Certifications:Alzheimer Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	2
Number Licensed Units	352

Number of Activities/Facilities licensed in county of Colleton	# Lics	2
Number Licensed Units :	352	

County: Dillon

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HERITAGE HEALTHCARE AT THE PINES 413 LAKESIDE CT DILLON, SC 29536-1999 FAC.#:843-774-2741 SANTILLI, MICHELLE L PH#: 843-774-2741 Facility Email: MSANTILLI@UHS-PRUITT.COM	Dillon / Ltd. Liability 413 LAKESIDE CT DILLON, SC 29536-1999 HERITAGE HEALTHCARE AT THE PINES LLC NCF-0835 / 11/30/2009	84
Licensed Beds Nursing Home 84 Institutional Nursing Home 0		

Certifications:None

SUNNY ACRES NURSING HOME 1727 BUCK SWAMP RD FORK, SC 29543-6116 FAC.#:843-464-6212 BARNETTE, BRAXTON PH#: 843-759-0025 Facility Email: TONY RAY@COOKE-ASSOCIATESCOM	Dillon / Corporation 1727 BUCK SWAMP RD FORK, SC 29543-6116 COOKE ASSOCIATES OF FORK INC NCF-0936 / 12/31/2009	111
Licensed Beds Nursing Home 111 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 195
Number of Activities/Facilities licensed in county of	Dillon	# Lics 2
	Number Licensed Units :	195

County: Dorchester

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HALLMARK HEALTHCARE CENTER 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 FAC.#:843-821-5005 STINSON, DURENA PH#: 843-821-5005 Facility Email: ADMINHASNSC@PALMETTOLTC.COM	Dorchester / Ltd. Liability 255 MIDLAND PKWY SUMMERVILLE, SC 29485-8104 PALMETTO HALLMARK OPERATING LLC NCF-0932 / 09/30/2010	88
<p>Licensed Beds Nursing Home 88 Institutional Nursing Home 0</p>		

Certifications:None

OAKBROOK HEALTH & REHABILITATION CENTER 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 FAC.#:843-875-9053 MAKAR, ANTHONY J PH#: 843-875-9053 Facility Email: ADMIN.OA.SC@PALMETTOLTC.COM	Dorchester / Ltd. Liability 920 TRAVELERS BLVD SUMMERVILLE, SC 29485-8213 PALMETTO OAKBROOK OPERATING LLC NCF-0923 / 09/30/2010	88
<p>Licensed Beds Nursing Home 88 Institutional Nursing Home 0</p>		

Certifications:None

PRESBYTERIAN HOME OF SOUTH CAROLINA - SUMMERVILLE 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 FAC.#:843-873-2550 MILLER, ROBIN C PH#: Facility Email: RMILLER@PRESHOMESC.ORG	Dorchester / Non-Profit Corporation 201 W 9TH NORTH ST OFC 140 SUMMERVILLE, SC 29483-6701 PRESBYTERIAN HOME OF SOUTH CAROLINA INC NCF-0202 / 04/30/2010	87
<p>Licensed Beds Nursing Home 87 Institutional Nursing Home 0</p>		

Certifications:None

ST GEORGE HEALTHCARE CENTER 905 DUKES ST SAINT GEORGE, SC 29477-2059 FAC.#:843-563-4602 DAVIS, NITA J PH#: Facility Email: ADMIN.STGE.SC@PALMETTOLTC.COM	Dorchester / Ltd. Liability 905 DUKES ST SAINT GEORGE, SC 29477-2059 PALMETTO ST GEORGE OPERATING LLC NCF-0924 / 09/30/2010	88
<p>Licensed Beds Nursing Home 88 Institutional Nursing Home 0</p>		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	4	Number Licensed Units	351
Number of Activities/Facilities licensed in county of Dorchester # Lics 4			
Number Licensed Units : 351			

County: Edgefield

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

TRINITY MISSION HEALTH & REHAB OF EDGEFIELD	Edgefield / Ltd. Liability	120
226 WA REEL DR	PO BOX 668	
EDGEFIELD, SC 29824-4534 FAC.#:803-637-5312	EDGEFIELD, SC 29824-0668	
FALLAW, DENISE PH#: 803-637-5312	TRINITY MISSION HEALTH & REHAB OF EDGEFIELD LLC	
Facility Email: DFALLAW@TMEDGEFIELD.COM	NCF-0941 / 07/31/2010	

Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="120"/>
Number of Activities/Facilities licensed in county of	Edgefield	# Lics	1
	Number Licensed Units :	120	

County: Fairfield

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
FAIRFIELD HEALTHCARE CENTER 117 BELLFIELD RD RIDGEWAY, SC 29130-8261 FAC.#:803-337-2257 NESMITH, NATHAN PH#: 803-337-2257 Facility Email: NNESMITH@LAURELBAYECOM	Fairfield / Ltd. Liability PO BOX 70 RIDGEWAY, SC 29130-0070 FAIRFIELD HEALTHCARE CENTER LLC NCF-0776 / 06/30/2010	112
Licensed Beds Nursing Home 112 Institutional Nursing Home 0		

Certifications:None

UNIHEALTH POST-ACUTE CARE-TANGLEWOOD 213 TANGLEWOOD CT RIDGEWAY, SC 29130-7100 FAC.#:803-337-3211 PARRIS, BRENDA H PH#: 803-337-3211 Facility Email: PDUNCAN@UHS-PRUITT.COM	Fairfield / Limited Liability 213 TANGLEWOOD CT RIDGEWAY, SC 29130-7100 UNIHEALTH POST-ACUTE CARE-TANGLEWOOD LLC NCF-0710 / 10/31/2010	150
Licensed Beds Nursing Home 150 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 262
Number of Activities/Facilities licensed in county of Fairfield	# Lics	2
	Number Licensed Units :	262

County: Florence

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

CAROLINAS HOSPITAL SYSTEM TRANSITIONAL CARE UNIT	Florence / Corporation	24
121 E CEDAR ST	PO BOX 100550	
FLORENCE, SC 29506-2576 FAC.#:843-661-3200	FLORENCE, SC 29502-0550	
SYLVESTER, JANET PH#: 843-674-5000	QHG OF SOUTH CAROLINA INC	
Facility Email: JOLOUGHLIN@CAROLINASHOSPITAL.COM	NCF-0673 / 10/31/2010	

Licensed Beds Nursing Home 24 Institutional Nursing Home 0

Certifications:None

COMMANDER NURSING CENTER	Florence / Corporation	163
4438 PAMPLICO HWY	4438 PAMPLICO HWY	
FLORENCE, SC 29505-8502 FAC.#:843-669-3502	FLORENCE, SC 29505-8502	
COMMANDER III, JOE M PH#: 843-669-3502	COMMANDER HEALTH CARE FACILITIES INC	
Facility Email: No Facility Email on Record	NCF-0233 / 07/31/2010	

Licensed Beds Nursing Home 163 Institutional Nursing Home 0

Certifications:Alzheimer Care

COOKE ASSOCIATES OF FLORENCE	Florence / Corporation	88
133 W CLARKE RD	133 W CLARKE RD	
FLORENCE, SC 29501-0722 FAC.#:843-669-4374	FLORENCE, SC 29501-0722	
HAMMOND, NANCY R PH#: 843-669-4374	COOKE ASSOCIATES OF FLORENCE INC	
Facility Email: No Facility Email on Record	NCF-0935 / 12/31/2009	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

DR RONALD E MCNAIR NURSING AND REHABILITATION CENTER	Florence / Corporation	88
56 GENESIS DR	PO BOX 1598	
LAKE CITY, SC 29560-5531 FAC.#:843-389-3685	LAKE CITY, SC 29560-1598	
FRIERSON, SARAH L PH#: 843-389-3685	HEALTHCARE PANASCOPE INC	
Facility Email: MCNAIRNSGCTR@FTC-I.NET	NCF-0918 / 11/30/2009	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

FAITH HEALTHCARE CENTER	Florence / Ltd. Liability	104
617 W MARION ST	617 W MARION ST	
FLORENCE, SC 29501-2470 FAC.#:843-669-9958	FLORENCE, SC 29501-2470	
SWINTON-MICKENS, EVELYN PH#: 843-669-9958	PALMETTO FAITH OPERATING LLC	
Facility Email: ADMINFA.SC@PALMETTOLTTC.COM	NCF-0927 / 09/30/2010	

Licensed Beds Nursing Home 104 Institutional Nursing Home 0

Certifications:None

County: Florence

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HERITAGE HOME OF FLORENCE 515 WARLEY ST FLORENCE, SC 29501-5199 FAC.#:843-662-4573 SKINNER SR, JEFFREY V PH#: 843-662-4573 Facility Email: No Facility Email on Record	Florence / Corporation 515 WARLEY ST FLORENCE, SC 29501-5199 HERITAGE HOME OF FLORENCE INC NCF-0450 / 02/28/2010	132

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:Alzheimer Care

HONORAGE NURSING CENTER 1207 N CASHUA RD FLORENCE, SC 29501-6969 FAC.#:843-665-6172 CLARKE, HOWARD W PH#: 843-665-6172 Facility Email: No Facility Email on Record	Florence / Corporation 1207 N CASHUA RD FLORENCE, SC 29501-6969 HONORAGE NURSING HOME OF FLORENCE SC INC NCF-0329 / 12/31/2009	88
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Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:Alzheimer Care

LAKE CITY-SCRANTON HEALTHCARE CENTER 1940 BOYD RD SCRANTON, SC 29591-5835 FAC.#:843-389-9201 KNEELAND, ROBERT E PH#: 803-817-1733 Facility Email: ADMIN.LACI@PALMETTOLTC.COM	Florence / Ltd. Liability 1940 BOYD RD SCRANTON, SC 29591-5835 PALMETTO LAKE CITY OPERATING LLC NCF-0928 / 09/30/2010	88
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Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

METHODIST MANOR HEALTHCARE CENTER 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 FAC.#:843-664-0700 JACKSON, WILLIAM F PH#: 843-664-0700 Facility Email: FJACKSON@METHODIST-MANOR.COM	Florence / Corporation 2100 TWIN CHURCH RD FLORENCE, SC 29501-8200 UNITED METHODIST MANOR OF THE PEE DEE INC NCF-0579 / 09/30/2010	32
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Licensed Beds Nursing Home 0 Institutional Nursing Home 32

Certifications:Alzheimer Unit, Alzheimers Care

PRESBYTERIAN HOME OF SOUTH CAROLINA-FLORENCE 2350 W LUCAS ST FLORENCE, SC 29501-1201 FAC.#:843-665-2222 HICKMAN III, WALTER E PH#: 843-665-2222 Facility Email: WHICKMAN@PRESHOMESC.ORG	Florence / Non-Profit Corporation 2350 W LUCAS ST FLORENCE, SC 29501-1201 PRESBYTERIAN HOME OF SOUTH CAROLINA INC NCF-0420 / 09/30/2010	44
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Licensed Beds Nursing Home 0 Institutional Nursing Home 44

Certifications:Alzheimer Care

County: Florence

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
SOUTHLAND HEALTH CARE CENTER 722 S DARGAN ST FLORENCE, SC 29506-2562 FAC.#:843-669-4403 COMMANDER, CHARLES S PH#: 843-669-4403	Florence / Corporation 722 S DARGAN ST FLORENCE, SC 29506-2562 COMMANDER HEALTH CARE FACILITIES INC NCF-0599 / 12/31/2009	88
Facility Email: No Facility Email on Record		
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	11	Number Licensed Units	939
Number of Activities/Facilities licensed in county of	Florence	# Lics	11
	Number Licensed Units :		939

County: Georgetown

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
GEORGETOWN HEALTHCARE & REHAB 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 FAC.#:843-546-4123 RABY, SHEILA W PH#: 843-546-4123 Facility Email: ADMIN@GEORGETOWNHEALTHCARE.NET	Georgetown / Corporation 2715 S ISLAND RD GEORGETOWN, SC 29440-4415 GEORGETOWN HEALTHCARE & REHAB INC NCF-0633 / 03/31/2010	84
Licensed Beds Nursing Home 84 Institutional Nursing Home 0		

Certifications:None

LAKES AT LITCHFIELD SKILLED NURSING CENTER 80 TIMBERVIEW CT PAWLEYS ISLAND, SC 29585-5798 FAC.#:843-235-9393 RICHARDSON, JACQUE PH#: 843-235-9393 Facility Email: NMCKINSTRY@LAKES-LITCHFIELD.COM	Georgetown / Ltd. Liability 120 LAKES AT LITCHFIELD DR PAWLEYS ISLAND, SC 29585-5515 LITCHFIELD RETIREMENT LLC NCF-0843 / 12/31/2009	24
Licensed Beds Nursing Home 17 Institutional Nursing Home 7		

Certifications:None

PRINCE GEORGE HEALTHCARE CENTER 901 MAPLE ST GEORGETOWN, SC 29440-4333 FAC.#:843-546-6101 OTHMAN, MOHAMED PH#: 843-546-6101 Facility Email: ADMIN.PR.SC@PALMETTOLTC.COM	Georgetown / Ltd. Liability 901 MAPLE ST GEORGETOWN, SC 29440-4333 PALMETTO PRINCE GEORGE OPERATING LLC NCF-0930 / 09/30/2010	148
Licensed Beds Nursing Home 148 Institutional Nursing Home 0		

Certifications:Alzheimer Unit, Alzheimers Care

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units	<input type="text" value="256"/>
Number of Activities/Facilities licensed in county of	Georgetown	# Lics	3
	Number Licensed Units :	256	

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ARBORETUM OF THE WOODLANDS AT FURMAN NURSING HOME 50 ARBORETUM LN GREENVILLE, SC 29617-6227 FAC.#:864-371-3100 MACK, JAMES H PH#: 864-371-3100 Facility Email: TCANNADAY@THEWOODLANDSATFURMAN.ORG	Greenville / Non-Profit Corporation 1500 TRAILHEAD CT GREENVILLE, SC 29617-6226 UPSTATE SENIOR LIVING INC NCF-0957 / 06/30/2010	30
Licensed Beds	Nursing Home 17 Institutional Nursing Home 13	
Certifications:None		
BRIARWOOD LIVING CENTER 721 W CURTIS ST SIMPSONVILLE, SC 29681-2526 FAC.#:864-967-7191 JOHNSON, DENA CHANEZ PH#: 864-269-3725 Facility Email: JSWIFT@HMR-LTC.COM	Greenville / Limited Liability Company (multiple member) 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 BRIARWOOD LIVING CENTER LLC NCF-0900 / 09/30/2010	42
Licensed Beds	Nursing Home 42 Institutional Nursing Home 0	
Certifications:None		
BRIGHTON GARDENS BY MARRIOTT OF GREENVILLE 1306 PELHAM RD OFC GREENVILLE, SC 29615-3661 FAC.#:864-286-6600 TOWERY, AL M PH#: 864-286-6600 Facility Email: GREENVILLEBG.ED@SUNRISESENIORLIVING.COM	Greenville / Corporation 1306 PELHAM RD OFC GREENVILLE, SC 29615-3661 SUNRISE SENIOR LIVING SERVICES INC NCF-0785 / 02/28/2010	45
Licensed Beds	Nursing Home 45 Institutional Nursing Home 0	
Certifications:None		
COTTAGES AT BRUSHY CREEK 101 COTTAGE CREEK CIR GREER, SC 29650-2438 FAC.#:864-797-8990 NICHOLS, KAREN H PH#: 864-797-8800 Facility Email: GHSNET@GHS.ORG	Greenville / District 701 GROVE RD, ISC PLANNING-3RD FLOOR GREENVILLE, SC 29605-5611 GREENVILLE HOSPITAL SYSTEM NCF-0945 / 10/31/2010	144
Licensed Beds	Nursing Home 144 Institutional Nursing Home 0	
Certifications:None		
FALLS CREEK LIVING CENTER 2906 GEER HWY MARIETTA, SC 29661-9517 FAC.#:864-836-6381 JONES, EVELYN E PH#: 864-836-6381 Facility Email: No Facility Email on Record	Greenville / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 FALLS CREEK LIVING CENTER LLC NCF-0920 / 05/31/2010	44
Licensed Beds	Nursing Home 44 Institutional Nursing Home 0	
Certifications:None		

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
FOUNTAIN INN NURSING HOME 501 GULLIVER ST FOUNTAIN INN, SC 29644-2105 FAC.#:864-862-2554 BAUGHMAN, KATHY J PH#: 864-862-2554 Facility Email: KBAUGHMAN@COOKE-ASSOCIATESCOM	Greenville / Limited Liability PO BOX 67 FOUNTAIN INN, SC 29644-0067 COOKE ASSOCIATES OF FOUNTAIN INN LLC NCF-0939 / 03/31/2010	60
Licensed Beds Nursing Home 60 Institutional Nursing Home 0		
Certifications:None		
GREENVILLE LIVING CENTER 809 LAURENS RD GREENVILLE, SC 29607-1914 FAC.#:864-232-8196 MCLEOD, CHARLES H PH#: 864-967-7191 Facility Email: JSWIFT@HMR-LTC.COM	Greenville / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 GREENVILLE LIVING CENTER LLC NCF-0912 / 09/30/2010	79
Licensed Beds Nursing Home 79 Institutional Nursing Home 0		
Certifications:None		
GREENVILLE MEMORIAL MEDICAL CENTER SUBACUTE UNIT 701 GROVE RD GREENVILLE, SC 29605-5611 FAC.#:864-455-1728 HEALY, STANLEY PH#: 864-455-7000 Facility Email: GHSNET.GHSORG	Greenville / District 701 GROVE RD, ISC PLANNING-3RD FLOOR GREENVILLE, SC 29605-5611 GREENVILLE HOSPITAL SYSTEM NCF-0934 / 02/28/2010	15
Licensed Beds Nursing Home 15 Institutional Nursing Home 0		
Certifications:None		
LAUREL BAYE HEALTHCARE OF GREENVILLE 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 FAC.#:864-232-2442 NADKARNI MS, NATASHA A PH#: 843-216-6800 Facility Email: TBAXLEY@LAURELBAYECOM	Greenville / Ltd. Liability 661 RUTHERFORD RD GREENVILLE, SC 29609-4696 LAUREL BAYE HEALTHCARE OF GREENVILLE LLC NCF-0805 / 04/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		
LINVILLE COURTS AT THE CASCADES VERDAE 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 FAC.#:864-322-7178 COATES, MELANIE M PH#: 864-528-5500 Facility Email: No Facility Email on Record	Greenville / Limited Liability 30 SPRINGCREST CT GREENVILLE, SC 29607-4034 BANYAN GREENVILLE NURSING SERVICES LLC NCF-0956 / 04/30/2010	44
Licensed Beds Nursing Home 22 Institutional Nursing Home 22		
Certifications:Alzheimer Care		

County: Greenville**Facility Type: Nursing Home**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
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MAGNOLIA MANOR-GREENVILLE 411 ANSEL ST GREENVILLE, SC 29601-3499 FAC.#:864-232-5368 OWINGS, JANE B PH#: 864-232-5368 Facility Email: JANE.OWINGS@THICARE.COM	Greenville / Ltd. Liability 411 ANSEL ST GREENVILLE, SC 29601-3499 THI OF SOUTH CAROLINA AT GREENVILLE LLC NCF-0860 / 08/31/2010	99
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Licensed Beds Nursing Home 99 Institutional Nursing Home 0

Certifications:None

MAGNOLIA PLACE AT GREENVILLE 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 FAC.#:864-288-1415 FARTHING, SHANNON P PH#: 864-288-1415 Facility Email: SHANNON.FARTHING@THICARE.COM	Greenville / Ltd. Liability 35 SOUTHPOINTE DR GREENVILLE, SC 29607-5956 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT GREENVILLE LLC NCF-0869 / 08/31/2010	120
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Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:Alzheimer Care

NHC HEALTHCARE GREENVILLE 1305 BOILING SPRINGS RD GREER, SC 29650-4139 FAC.#:864-458-7566 MOORHOUSE, BRYAN M PH#: 864-458-7566 Facility Email: 1PEN@NHCGREENVILLE.COM	Greenville / Ltd. Liability 1305 BOILING SPRINGS RD GREER, SC 29650-4139 NHC HEALTHCARE/GREENVILLE LLC NCF-0807 / 07/31/2010	176
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Licensed Beds Nursing Home 176 Institutional Nursing Home 0

Certifications:None

NHC HEALTHCARE MAULDIN 850 E BUTLER RD GREENVILLE, SC 29607-5842 FAC.#:864-675-6421 DOBSON, DEBORAH D PH#: 864-675-6421 Facility Email: NHCMAULDIN@NHCMAULDIN.COM	Greenville / Ltd. Liability PO BOX 600 MAULDIN, SC 29662-0600 NHC HEALTHCARE/MAULDIN LLC NCF-0796 / 06/30/2010	180
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Licensed Beds Nursing Home 180 Institutional Nursing Home 0

Certifications:Alzheimer Unit, Alzheimers Care

OAKMONT EAST NURSING CENTER 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 FAC.#:864-246-2721 CADY, BETTY PH#: 864-246-2721 Facility Email: 4032ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 601 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1698 OAKMONT EAST GREENVILLE SC LLC NCF-0952 / 12/31/2009	132
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Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

County: Greenville

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
OAKMONT WEST NURSING CENTER 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 FAC.#:864-246-2721 GRANGER, PAUL PH#: 864-269-3725 Facility Email: 4033ADMIN@HCR-MANORCARE.COM	Greenville / Limited Liability 600 SULPHUR SPRINGS RD GREENVILLE, SC 29617-1985 OAKMONT WEST GREENVILLE SC LLC NCF-0953 / 12/31/2009	125
Licensed Beds Nursing Home 125 Institutional Nursing Home 0		
Certifications:None		
PIEDMONT LIVING CENTER 401 CHANDLER RD GREER, SC 29651-1243 FAC.#:864-879-1370 HILL, JAMES PH#: 864-879-1370 Facility Email: JSWIFT@HMR-LTC.COM	Greenville / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 PIEDMONT LIVING CENTER LLC NCF-0908 / 09/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		
ROLLING GREEN VILLAGE HEALTH CARE FACILITY 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 FAC.#:864-987-9800 EXLINE, KYLE T PH#: 864-213-4222 Facility Email: No Facility Email on Record	Greenville / Corporation 1 HOKE SMITH BLVD OFC GREENVILLE, SC 29615-5399 GREENVILLE BAPTIST RETIREMENT COMMUNITY INC NCF-0456 / 10/31/2009 (Renewal Pending)	44
Licensed Beds Nursing Home 10 Institutional Nursing Home 34		
Certifications:None		
SUMMIT PLACE LIVING CENTER 807 SE MAIN ST SIMPSONVILLE, SC 29681-7150 FAC.#:864-963-6069 CAJKA, AMY PH#: 864-963-6069 Facility Email: JSWIFT@HMR-LTC.COM	Greenville / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 SUMMIT PLACE LIVING CENTER LLC NCF-0905 / 09/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		
WESTSIDE LIVING CENTER 8 N TEXAS AVE GREENVILLE, SC 29611-5034 FAC.#:864-295-1331 BYINGTON, HEATHER PH#: 864-295-1331 Facility Email: JSWIFT@HMR-LTC.COM	Greenville / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 WESTSIDE LIVING CENTER LLC NCF-0903 / 09/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		

County: Greenville

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	20
Number Licensed Units	1,907

Number of Activities/Facilities licensed in county of Greenville	# Lics	20
Number Licensed Units :	1,907	

County: Greenwood

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

GREENWOOD TRANSITIONAL REHABILITATION UNIT	Greenwood / Ltd. Liability	12
1530 PKWY	1530 PKWY	
GREENWOOD, SC 29646-4027 FAC.#:864-330-1800	GREENWOOD, SC 29646-4027	
KAGLE, TIM PH#: 864-330-9070	GREENWOOD REGIONAL REHABILITATION HOSPITAL LLC	
Facility Email: KAGLET@ERNESTHEALTH.COM	NCF-0944 / 10/31/2010	

Licensed Beds Nursing Home 12 Institutional Nursing Home 0

Certifications:None

HEALTH CARE CENTER OF WESLEY COMMONS	Greenwood / Non-Profit Corporation	102
1110 MARSHALL RD	1110 MARSHALL RD	
GREENWOOD, SC 29646-4299 FAC.#:864-227-7250	GREENWOOD, SC 29646-4299	
HOLMES, KIMBERLY K PH#: 864-227-7250	WESLEY COMMONS	
Facility Email: KHOMES@WESLEYCOMMONS.ORG	NCF-0304 / 03/31/2010	

Licensed Beds Nursing Home 102 Institutional Nursing Home 0

Certifications:None

MAGNOLIA MANOR-GREENWOOD	Greenwood / Ltd. Liability	88
1415 PKWY	1415 PKWY	
GREENWOOD, SC 29646-4044 FAC.#:864-227-9500	GREENWOOD, SC 29646-4044	
GOFORTH, EDITH C PH#: 864-227-9500	THI OF SOUTH CAROLINA AT GREENWOOD LLC	
Facility Email: No Facility Email on Record	NCF-0866 / 08/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

NHC HEALTHCARE GREENWOOD	Greenwood / Ltd. Liability	152
437 CAMBRIDGE AVE E	PO BOX 3109	
GREENWOOD, SC 29646-2244 FAC.#:864-223-1950	GREENWOOD, SC 29648-3109	
SELLARS, RICHARD A PH#: 864-223-1950	NHC HEALTHCARE/GREENWOOD LLC	
Facility Email: RSELLARS@NHCGREENWOOD.COM	NCF-0802 / 06/30/2010	

Licensed Beds Nursing Home 152 Institutional Nursing Home 0

Certifications:Alzheimer Care

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	4
Number Licensed Units	354

Number of Activities/Facilities licensed in county of	Greenwood	# Lics	4
	Number Licensed Units :	354	

County: Hampton

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
UNIHEALTH POST ACUTE CARE-LOW COUNTRY 200 LIBERTY ST S ESTILL, SC 29918-3310 FAC.#:803-625-3852 SMITH, DEAN PH#: 803-625-3852 Facility Email: No Facility Email on Record	Hampton / Ltd. Liability 200 LIBERTY ST S ESTILL, SC 29918-3310 HERITAGE HEALTHCARE OF ESTILL LLC NCF-0922 / 09/30/2010	104

Licensed Beds Nursing Home 104 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	1	Number Licensed Units	104
Number of Activities/Facilities licensed in county of	Hampton	# Lics	1
		Number Licensed Units :	104

County: Horry

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AGAPE REHABILITATION OF CONWAY 2320 HWY 378 CONWAY, SC 29527-4911 FAC.#:843-397-2273 STAUB, MATTHEW J PH#: 843-397-2273 Facility Email: MATT@AGAPESENIOR.COM	Horry / Corporation 2320 HWY 378 CONWAY, SC 29527-4911 AGAPE REHABILITATION OF CONWAY INC NCF-0954 / 03/31/2010	72
Licensed Beds Nursing Home 72 Institutional Nursing Home 0		
Certifications:None		
BRIGHTWATER SKILLED NURSING CENTER 171 BRIGHTWATER DR MYRTLE BEACH, SC 29579-8268 FAC.#:843-903-8300 RICHARDSON, JACQUE W PH#: 843-903-8300 Facility Email: TBAZEN@SENIOR-LIVING-COMMUNITIESCOM	Horry / Limited Liability 171 BRIGHTWATER DR MYRTLE BEACH, SC 29579-8268 BRIGHTWATER RETIREMENT LLC NCF-0955 / 04/30/2010	32
Licensed Beds Nursing Home 32 Institutional Nursing Home 0		
Certifications:None		
CONWAY MANOR 3300 4TH AVE CONWAY, SC 29527-6099 FAC.#:843-248-5728 TILLER, RAYMOND G PH#: 843-248-5728 Facility Email: RTILLER@CONWAYMANOR.NET	Horry / Ltd. Liability 3300 4TH AVE CONWAY, SC 29527-6099 CONWAY MANOR LLC NCF-0899 / 05/31/2010	190
Licensed Beds Nursing Home 190 Institutional Nursing Home 0		
Certifications:None		
COVENANT TOWERS HEALTH CARE 5001 LITTLE RIVER RD MYRTLE BEACH, SC 29577-2478 FAC.#:843-449-2484 HENDRICK, DEBBIE M PH#: 843-449-2484 Facility Email: DEBBIE@COVENANTTOWERS.COM	Horry / Non-Profit Corporation 5001 LITTLE RIVER RD, COVENANT TOWERS W-505 MYRTLE BEACH, SC 29577-2478 COVENANT TOWERS HOMEOWNERS ASSOCIATION INC NCF-0469 / 08/31/2010	30
Licensed Beds Nursing Home 30 Institutional Nursing Home 0		
Certifications:None		
GRAND STRAND HEALTHCARE 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 FAC.#:843-293-1137 BRANTON, HAROLD D PH#: 843-293-1137 Facility Email: NORMA29578@AOL.COM	Horry / Corporation 4452 SOCASTEE BLVD MYRTLE BEACH, SC 29588-7253 GRAND STRAND HEALTHCARE INC NCF-0573 / 03/31/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		
Certifications:None		

County: Jasper

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

RIDGELAND NURSING CENTER	Jasper / Corporation	88
1516 GRAYS HWY	PO BOX 1570	
RIDGELAND, SC 29936-5440 FAC.#:843-726-5581	RIDGELAND, SC 29936-2627	
BOYLES, SHERI P PH#: 843-726-5581	RIDGELAND NURSING CENTER INC	
Facility Email: SBOYLES@RIDGELANDNC.COM	NCF-0553 / 08/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	1	Number Licensed Units	88
Number of Activities/Facilities licensed in county of Jasper		# Lics	1
		Number Licensed Units :	88

County: Kershaw

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
A SAM KARESH LONG TERM CARE CENTER 1315 ROBERTS ST CAMDEN, SC 29020-3737 FAC.#:803-713-6376 HANLEY, JEANNE H PH#: 803-713-6376 Facility Email: HANLEY@KERSHAWHEALTH.ORG	Kershaw / County PO BOX 7003 CAMDEN, SC 29021-7003 KERSHAWHEALTH-BOARD OF TRUSTEES NCF-0313 / 09/30/2010	96
Licensed Beds Nursing Home 96 Institutional Nursing Home 0		

Certifications:None

SPRINGDALE HEALTHCARE CENTER 146 BATTLESHIP RD CAMDEN, SC 29020-2060 FAC.#:843-432-3741 SMALLS, CARLTON P PH#: 803-432-3741 Facility Email: ADMIN.SPCA.SC@PALMETTOLTC.COM	Kershaw / Ltd. Liability 146 BATTLESHIP RD CAMDEN, SC 29020-2060 PALMETTO SPRINGDALE OPERATING LLC NCF-0925 / 09/30/2010	148
Licensed Beds Nursing Home 148 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 244
Number of Activities/Facilities licensed in county of	Kershaw	# Lics 2
	Number Licensed Units :	244

County: Lancaster

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LANCASTER CONVALESCENT CENTER 2044 PAGELAND HWY LANCASTER, SC 29720-7608 FAC.#:803-285-7907 SCHOLL, DEBORAH M PH#: 803-285-7907 Facility Email: DSCHOLL@CONPORIUM.NET	Lancaster / Corporation PO BOX 1749 LANCASTER, SC 29721-1749 LANCASTER CONVALESCENT CENTER INC NCF-0551 / 04/30/2010	142
Licensed Beds Nursing Home 142 Institutional Nursing Home 0		

Certifications:None

TRANSITIONAL CARE UNIT AT SPRINGS MEMORIAL HOSPITAL 800 W MEETING ST LANCASTER, SC 29720-2298 FAC.#:803-286-1481 HUEY, NANCY D PH#: 803-286-1837 Facility Email: KAREN_MARTIN@CHS.NET	Lancaster / Corporation 800 W MEETING ST LANCASTER, SC 29720-2298 LANCASTER HOSPITAL CORPORATION NCF-0723 / 04/30/2010	14
Licensed Beds Nursing Home 14 Institutional Nursing Home 0		

Certifications:None

WHITE OAK MANOR-LANCASTER 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 FAC.#:803-286-1464 CURTIS, ADRIENNE N PH#: 803-286-1464 Facility Email: NCURTIS@WHITEOAKMANOR.COM	Lancaster / Corporation 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 WHITE OAK MANOR-LANCASTER INC NCF-0883 / 12/31/2009	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units <input type="text" value="288"/>
Number of Activities/Facilities licensed in county of	Lancaster	# Lics 3
	Number Licensed Units :	288

County: Laurens**Facility Type: Nursing Home**

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
LAURENS COUNTY HEALTH CARE SYSTEM SKILLED NURSING FACILITY	Laurens / District	14
22725 HWY 76 E	22725 HWY 76 E	
CLINTON, SC 29325-7527 FAC.#:864-938-2843	CLINTON, SC 29325-7527	
FISCUS, DEBORAH B PH#: 864-938-2843	LAURENS COUNTY HEALTH CARE SYSTEM	
Facility Email: DFISCUS@LCHCSORG	NCF-0786 / 04/30/2010	
Licensed Beds	Nursing Home 14	Institutional Nursing Home 0

Certifications:None

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY	Laurens / Non-Profit Corporation	88
1 MARTHA FRANKS DR	1 MARTHA FRANKS DR	
LAURENS, SC 29360-1799 FAC.#:864-984-4541	LAURENS, SC 29360-1799	
ORCUTT, LINDA PH#: 864-984-4541	SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC	
Facility Email: DHAIR@SCBMA.COM	NCF-0435 / 03/31/2010	
Licensed Beds	Nursing Home 81	Institutional Nursing Home 7

Certifications:Alzheimer Unit, Alzheimers Care

NHC HEALTHCARE CLINTON	Laurens / Ltd. Liability	131
304 JACOBS HWY	PO BOX 727	
CLINTON, SC 29325-7279 FAC.#:864-833-2550	CLINTON, SC 29325-0727	
SELLARS, GIDEON PH#: 864-833-2550	NHC HEALTHCARE/CLINTON LLC	
Facility Email: GSELLARS@NHCLCLINTON.NET	NCF-0804 / 06/30/2010	
Licensed Beds	Nursing Home 131	Institutional Nursing Home 0

Certifications:None

NHC HEALTHCARE LAURENS	Laurens / Ltd. Liability	176
379 PINEHAVEN ST EXT	PO BOX 1259	
LAURENS, SC 29360-1259 FAC.#:864-984-6584	LAURENS, SC 29360-1259	
SHEARER, RICKIE L PH#: 864-984-6584	NHC HEALTHCARE/LAURENS LLC	
Facility Email: RSHEARER@NHCLAURENSCOM	NCF-0326 / 06/30/2010	
Licensed Beds	Nursing Home 176	Institutional Nursing Home 0

Certifications:Alzheimer Care

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON	Laurens / Non-Profit Corporation	66
801 MUSGROVE ST	801 MUSGROVE ST	
CLINTON, SC 29325-1796 FAC.#:864-833-5190	CLINTON, SC 29325-1796	
SNIDER, ANN T PH#: 864-833-5190	PRESBYTERIAN HOME OF SOUTH CAROLINA INC	
Facility Email: ASNIDER@PRESHOMEESC.ORG	NCF-0366 / 04/30/2010	
Licensed Beds	Nursing Home 0	Institutional Nursing Home 66

Certifications:None

County: Laurens

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	5
Number Licensed Units	475

Number of Activities/Facilities licensed in county of Laurens	# Lics	5
Number Licensed Units :	475	

County: Lee

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
MCCOY MEMORIAL NURSING CENTER	Lee / Ltd. Liability	120
207 CHAPPELL DR	207 CHAPPELL DR	
BISHOPVILLE, SC 29010-1167 FAC.#:803-484-5636	BISHOPVILLE, SC 29010-1167	
MOORE, JOHN D PH#: 803-484-5636	COOKE ASSOCIATES OF BISHOPVILLE LLC	
Facility Email: JMOORE@COOKE-ASSOCIATESCOM	NCF-0940 / 12/31/2009	
Licensed Beds Nursing Home 120	Institutional Nursing Home 0	

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	1	Number Licensed Units	120
Number of Activities/Facilities licensed in county of Lee		# Lics	1
		Number Licensed Units :	120

County: Lexington

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

AGAPE NURSING AND REHABILITATION CENTER	Lexington / Corporation	100
300 AGAPE DR	300 AGAPE DR	
WEST COLUMBIA, SC 29169-3307 FAC.#:803-739-5282	WEST COLUMBIA, SC 29169-3307	
SIPPEL, MARILYN E PH#: 803-939-3000	AGAPE NURSING AND REHABILITATION CENTER INC	
Facility Email: BSIPPEL@AGAPESENIOR.COM	NCF-0837 / 12/31/2009	

Licensed Beds Nursing Home 100 Institutional Nursing Home 0

Certifications:Alzheimer Care

BRIAN CENTER OF NURSING CARE-ST ANDREWS	Lexington / Ltd. Liability	120
3514 SIDNEY RD	3514 SIDNEY RD	
COLUMBIA, SC 29210-4494 FAC.#:803-798-9715	COLUMBIA, SC 29210-4494	
HOLLOMAN, LISA D PH#: 803-798-9715	BRIAN CENTER/ST ANDREWS LLC	
Facility Email: STANDREWS@CHOICE-HEALTH.NET	NCF-0875 / 05/31/2010	

Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:None

HEARTLAND OF LEXINGTON REHABILITATION AND NURSING CENTER	Lexington / Ltd. Liability	132
2416 SUNSET BLVD	2416 SUNSET BLVD	
WEST COLUMBIA, SC 29169-4791 FAC.#:803-796-8024	WEST COLUMBIA, SC 29169-4791	
BROWN, HAZEL D PH#: 803-256-4983	LEXINGTON REHABILITATION AND NURSING CENTER- LEXINGTON SC LLC	
Facility Email: 526ADMIN@HCR-MANORCARECOM	NCF-0948 / 12/31/2009	

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

LAUREL CREST RETIREMENT CENTER	Lexington / Non-Profit Corporation	12
100 JOSEPH WALKER DR	100 JOSEPH WALKER DR	
WEST COLUMBIA, SC 29169-6939 FAC.#:803-796-0370	WEST COLUMBIA, SC 29169-6939	
BRYAN, MARY Y PH#: 803-796-0370	FPCRC INC	
Facility Email: MBRYAN@LAUREL-CREST.COM	NCF-0647 / 09/30/2010	

Licensed Beds Nursing Home 0 Institutional Nursing Home 12

Certifications:None

LEXINGTON MEDICAL CENTER EXTENDED CARE	Lexington / Corporation	388
815 OLD CHEROKEE RD	815 OLD CHEROKEE RD	
LEXINGTON, SC 29072-8115 FAC.#:803-359-5181	LEXINGTON, SC 29072-8115	
STOWE, RICHARD W PH#: 803-359-5181	LEXMED INC	
Facility Email: No Facility Email on Record	NCF-0730 / 12/31/2009	

Licensed Beds Nursing Home 388 Institutional Nursing Home 0

Certifications:Alzheimer Unit

County: Lexington

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
NHC HEALTHCARE LEXINGTON 2993 SUNSET BLVD WEST COLUMBIA, SC 29169-3421 FAC.#:803-939-0026 MANLEY, MICHAEL W PH#: 803-939-0026 Facility Email: NHC@NHCLEXINGTONCOM	Lexington / Ltd. Liability 2993 SUNSET BLVD WEST COLUMBIA, SC 29169-3421 NHC HEALTHCARE/LEXINGTON LLC NCF-0798 / 06/30/2010	120
Licensed Beds Nursing Home 120 Institutional Nursing Home 0		

Certifications:None

PRESBYTERIAN HOME OF SOUTH CAROLINA-COLUMBIA 700 DAVEGA DR LEXINGTON, SC 29073-9698 FAC.#:803-796-8700 BURTON, EDWARD G PH#: 803-796-8700 Facility Email: EBURTON@PRESHOMESC.ORG	Lexington / Non-Profit Corporation 700 DAVEGA DR LEXINGTON, SC 29073-9698 PRESBYTERIAN HOME OF SOUTH CAROLINA INC NCF-0545 / 12/31/2009	44
Licensed Beds Nursing Home 44 Institutional Nursing Home 0		

Certifications:None

SC EPISCOPAL HOMES AT STILL HOPES 1 STILL HOPES DR WEST COLUMBIA, SC 29169-7164 FAC.#:803-739-5001 LONG, MARY K PH#: 803-796-6490 Facility Email: LSEGARS@STILLHOPESORG	Lexington / Corporation PO BOX 2959 WEST COLUMBIA, SC 29171-2959 SC EPISCOPAL HOME AT STILL HOPES INC NCF-0392 / 12/31/2009	62
Licensed Beds Nursing Home 20 Institutional Nursing Home 42		

Certifications:Alzheimer Unit

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="8"/>	Number Licensed Units	<input type="text" value="978"/>
Number of Activities/Facilities licensed in county of	Lexington	# Lics	8
	Number Licensed Units :		978

County: Marion

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MARION NURSING CENTER 2770 S HWY 501 MARION, SC 29571-7854 FAC.#:843-423-2601 JAMES, ALYCE C PH#: 843-423-2601 Facility Email: CENTERNURSES123@AOL.COM	Marion / Corporation PO BOX 1485 MARION, SC 29571-1485 MARION NURSING CENTER INC NCF-0689 / 09/30/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

MULLINS NURSING CENTER 518 S MAIN ST MULLINS, SC 29574-3510 FAC.#:843-464-8211 MARTIN, TONYA G PH#: 843-464-8211 Facility Email: TMARTIN@MCMED.ORG	Marion / Non-Profit Corporation 518 S MAIN ST MULLINS, SC 29574-3510 MARION REGIONAL HEALTHCARE SYSTEM NCF-0828 / 09/30/2010	92
Licensed Beds Nursing Home 92 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 180
Number of Activities/Facilities licensed in county of	Marion	# Lics 2
	Number Licensed Units :	180

County: Marlboro

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
DUNDEE MANOR	Marlboro / Ltd. Liability	110
710 15-401 BYP W	PO BOX 858	
BENNETTSVILLE, SC 29512-3641 FAC.#:864-703-5100	BENNETTSVILLE, SC 29512-0858	
GRIGGS, DEBRA G PH#:	DUNDEE MANOR LLC	
Facility Email: HHANNA@DUNDEEMANOR.NET	NCF-0897 / 05/31/2010	
Licensed Beds Nursing Home 110	Institutional Nursing Home 0	

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	1	Number Licensed Units	110
Number of Activities/Facilities licensed in county of	Marlboro	# Lics	1
	Number Licensed Units :		110

County: McCormick

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

SAVANNAH HEIGHTS LIVING CENTER	McCormick / Ltd. Liability	120
204 HOLIDAY RD	101 GRACE DR, ADVANTAGE HEALTH SYSTEMS	
MC CORMICK, SC 29835-3429 FAC.#:864-391-2397	EASLEY, SC 29640-9088	
ADAMS, WAYNE PH#: 864-391-2390	SAVANNAH HEIGHTS LIVING CENTER LLC	
Facility Email: JSWIFT@HMR-LTC.COM	NCF-0933 / 11/30/2009	

Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="120"/>
Number of Activities/Facilities licensed in county of	McCormick	# Lics	1
	Number Licensed Units :	120	

County: Newberry

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

J F HAWKINS NURSING HOME	Newberry / County	118
1330 KINARD ST	1330 KINARD ST	
NEWBERRY, SC 29108-3096 FAC.#:803-276-2601	NEWBERRY, SC 29108-3096	
GAMBILL, ELIZABETH A PH#: 803-284-4313	NEWBERRY COUNTY	
Facility Email: GGAMBILL@JFHAWKINS.ORG	NCF-0234 / 06/30/2010	
Licensed Beds Nursing Home 118	Institutional Nursing Home 0	

Certifications:Alzheimer Unit, Alzheimers Care

NEWBERRY COUNTY MEMORIAL HOSPITAL TRANSITIONAL CARE UNIT	Newberry / County	12
2669 KINARD ST	PO BOX 497	
NEWBERRY, SC 29108-2932 FAC.#:803-276-7570	NEWBERRY, SC 29108-0497	
ROBERTS, DEBRA G PH#: 803-405-7244	NEWBERRY COUNTY MEMORIAL HOSPITAL BOARD	
Facility Email: NEWBERRYHOSPITAL.ORG	NCF-0763 / 02/28/2010	
Licensed Beds Nursing Home 12	Institutional Nursing Home 0	

Certifications:None

WHITE OAK MANOR-NEWBERRY	Newberry / Corporation	146
2555 KINARD ST	2555 KINARD ST	
NEWBERRY, SC 29108-2903 FAC.#:803-276-6060	NEWBERRY, SC 29108-2903	
GILLIAM, MELISSA S PH#: 803-276-6060	WHITE OAK MANOR-NEWBERRY INC	
Facility Email: MGILLIAM@WHITEOAKMANOR.COM	NCF-0884 / 12/31/2009	
Licensed Beds Nursing Home 146	Institutional Nursing Home 0	

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	<input type="text" value="3"/>	Number Licensed Units <input type="text" value="276"/>
Number of Activities/Facilities licensed in county of	Newberry	# Lics 3
	Number Licensed Units :	276

County: Oconee

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LILA DOYLE AT OCONEE MEDICAL CENTER 101 LILA DOYLE DR SENECA, SC 29672-9495 FAC.#:864-885-7475 PAUL, KEITH A PH#: 864-882-3351 Facility Email: KEITH.PAUL.OCONEEMED.ORG	Oconee / Non-Profit Corporation 101 LILA DOYLE DR SENECA, SC 29672-9495 OCONEE MEDICAL CENTER INC NCF-0297 / 03/31/2010	120
Licensed Beds Nursing Home 120 Institutional Nursing Home 0		

Certifications:None

SENECA HEALTH AND REHABILITATION CENTER 140 TOKEENA RD SENECA, SC 29678-1799 FAC.#:864-882-1642 SMITH, PAMELA P PH#: 864-882-1642 Facility Email: PPSMITH@SAVASC.COM	Oconee / Ltd. Liability 140 TOKEENA RD SENECA, SC 29678-1799 SSC SENECA OPERATING COMPANY LLC NCF-0917 / 09/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		

Certifications:Alzheimer Care

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 252
Number of Activities/Facilities licensed in county of	Oconee	# Lics 2
	Number Licensed Units :	252

County: Orangeburg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
JOLLEY ACRES HEALTHCARE CENTER 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 FAC.#:803-534-1001 HOUSER, DEANA PH#: 803-534-1001 Facility Email: ADMIN.JO.SC@PALMETTOLTC.COM	Orangeburg / Ltd. Liability 1180 WOLFE TRL ORANGEBURG, SC 29115-7339 PALMETTO JOLLEY ACRES OPERATING LLC NCF-0929 / 09/30/2010	60
Licensed Beds Nursing Home 60 Institutional Nursing Home 0		

Certifications:None

LAUREL BAYE HEALTHCARE OF ORANGEBURG 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 FAC.#:803-534-7771 GILSTRAP, DEBRA L PH#: Facility Email: No Facility Email on Record	Orangeburg / Ltd. Liability 575 STONEWALL JACKSON BLVD ORANGEBURG, SC 29115-7250 LAUREL BAYE HEALTHCARE OF ORANGEBURG LLC NCF-0858 / 10/31/2010	113
Licensed Beds Nursing Home 113 Institutional Nursing Home 0		

Certifications:None

METHODIST OAKS 1000 METHODIST OAKS DR, METHODIST OAKS ORANGEBURG, SC 29115-1813 FAC.#:803-534-1212 JOHNSON, PATRICIA W PH#: 803-534-1212 Facility Email: No Facility Email on Record	Orangeburg / Corporation PO BOX 327 ORANGEBURG, SC 29116-0327 METHODIST OAKS INC NCF-0735 / 11/30/2009	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		

Certifications:None

UNIHEALTH POST ACUTE CARE-ORANGEBURG 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 FAC.#:803-534-7036 MARTIN, THEODOCIA R PH#: 803-534-7036 Facility Email: No Facility Email on Record	Orangeburg / Limited Liability 755 WHITMAN ST SE ORANGEBURG, SC 29115-6163 UNIHEALTH POST ACUTE CARE-ORANGEBURG LLC NCF-0617 / 09/30/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="4"/>	Number Licensed Units	<input type="text" value="393"/>
Number of Activities/Facilities licensed in county of	Orangeburg	# Lics	4
	Number Licensed Units :		393

County: Pickens

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

BLUE RIDGE LIVING CENTER	Pickens / Ltd. Liability	66
1850 CRESTVIEW RD	101 GRACE DR, ADVANTAGE HEALTH SYSTEMS	
EASLEY, SC 29642-3528 FAC.#:864-859-3236	EASLEY, SC 29640-9088	
MULLINS, LARRIS PH#: 864-859-3236	BLUE RIDGE LIVING CENTER LLC	
Facility Email: JSWIFT@HMR-LTC.COM	NCF-0901 / 09/30/2009 (Renewal Pending)	

Licensed Beds Nursing Home 66 Institutional Nursing Home 0

Certifications:None

CLEMSON AREA RETIREMENT CENTER-HEALTH CARE CENTER	Pickens / Corporation	52
500 DOWNS LOOP	500 DOWNS LOOP	
CLEMSON, SC 29631-2099 FAC.#:864-654-1155	CLEMSON, SC 29631-2099	
LEHEUP, JOHN D PH#: 864-654-1155	CARC INC	
Facility Email: WANDAPALMER@CLEMSONDOWNS.COM	NCF-0391 / 10/31/2010	

Licensed Beds Nursing Home 30 Institutional Nursing Home 22

Certifications:None

COUNTRYSIDE HEALTHCARE CENTER	Pickens / Corporation	44
706 PELZER HWY	3131 ELLIOTT AVE STE 500	
EASLEY, SC 29642-2941 FAC.#:864-859-0167	SEATTLE, WA 98121-1031	
DOUGLAS, LES PH#: 864-859-0167	EMERITUS CORPORATION	
Facility Email: No Facility Email on Record	NCF-0701 / 01/31/2010	

Licensed Beds Nursing Home 44 Institutional Nursing Home 0

Certifications:None

EASLEY LIVING CENTER	Pickens / Ltd. Liability	103
200 ANNE DR	101 GRACE DR, ADVANTAGE HEALTH SYSTEMS	
EASLEY, SC 29640-2061 FAC.#:864-859-9754	EASLEY, SC 29640-9088	
FERGUSON-DICKEY, SANDRA PH#: 864-269-3725	EASLEY LIVING CENTER LLC	
Facility Email: JSWIFT@HMR-LTC.COM	NCF-0913 / 09/30/2010	

Licensed Beds Nursing Home 103 Institutional Nursing Home 0

Certifications:None

HERITAGE HEALTHCARE OF PICKENS	Pickens / Limited Liability	44
163 LOVE AND CARE RD	163 LOVE AND CARE RD	
SIX MILE, SC 29682-9569 FAC.#:864-868-2307	SIX MILE, SC 29682-9569	
CARR, JOSEPH J PH#: 864-868-2307	HERITAGE HEALTHCARE OF PICKENS LLC	
Facility Email: No Facility Email on Record	NCF-0580 / 04/30/2010	

Licensed Beds Nursing Home 44 Institutional Nursing Home 0

Certifications:None

County: Pickens

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LAUREL HILL LIVING CENTER 716 E CEDAR ROCK ST PICKENS, SC 29671-2324 FAC.#:864-878-4739 GRIGGS, TODD PH#: Facility Email: JSWIFT@HMR-LTC.COM	Pickens / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 LAUREL HILL LIVING CENTER LLC NCF-0910 / 09/30/2010	80
Licensed Beds Nursing Home 80 Institutional Nursing Home 0		

Certifications:None

PRESBYTERIAN HOME OF SOUTH CAROLINA-FOOTHILLS 205 BUD NALLEY DR EASLEY, SC 29642 FAC.#:864-859-3367 MIZE, SIDNEY K PH#: 864-859-3367 Facility Email: No Facility Email on Record	Pickens / Non-Profit Corporation 205 BUD NALLEY DR EASLEY, SC 29642 PRESBYTERIAN HOME OF SOUTH CAROLINA INC NCF-0809 / 10/31/2010	18
Licensed Beds Nursing Home 0 Institutional Nursing Home 18		

Certifications:None

ROSEMOND LIVING CENTER 138 ROSEMOND ST PICKENS, SC 29671-2434 FAC.#:864-878-9620 WOOD, ZACHERY PH#: Facility Email: JSWIFT@HMR-LTC.COM	Pickens / Ltd. Liability 101 GRACE DR, ADVANTAGE HEALTH SYSTEMS EASLEY, SC 29640-9088 ROSEMOND LIVING CENTER LLC NCF-0906 / 09/30/2010	44
Licensed Beds Nursing Home 44 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="8"/>	Number Licensed Units	<input type="text" value="451"/>
Number of Activities/Facilities licensed in county of	Pickens	# Lics	8
	Number Licensed Units :	451	

Division of Health Licensing

County: Richland

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

C M TUCKER JR NURSING CARE CENTER FEWELL AND STONE PAVILIONS	Richland / State	252
2200 HARDEN ST	2200 HARDEN ST	
COLUMBIA, SC 29203-7199 FAC.#:803-737-5313	COLUMBIA, SC 29203-7199	
CORLEY, FRANCES F PH#: 803-737-5399	SC DEPARTMENT OF MENTAL HEALTH	
Facility Email: FFC29@SCDMH.ORG	NCF-0334 / 12/31/2009	

Licensed Beds Nursing Home 252 Institutional Nursing Home 0

Certifications:None

C M TUCKER JR NURSING CARE CENTER RODDEY PAVILION	Richland / State	308
2200 HARDEN ST	2200 HARDEN ST	
COLUMBIA, SC 29203-7199 FAC.#:803-737-7194	COLUMBIA, SC 29203-7199	
MOBLEY, NORMA JEAN PH#: 803-737-5339	SC DEPARTMENT OF MENTAL HEALTH	
Facility Email: NJM73@SCDMH.ORG	NCF-0726 / 12/31/2009	

Licensed Beds Nursing Home 308 Institutional Nursing Home 0

Certifications:None

COUNTRYWOOD NURSING CENTER	Richland / Ltd. Liability	38
1645 RIDGE RD	1645 RIDGE RD	
HOPKINS, SC 29061-8432 FAC.#:803-776-3873	HOPKINS, SC 29061-8432	
HAYNES, LARRY A PH#: 803-776-3873	COUNTRYWOOD NURSING CENTER LLC	
Facility Email: No Facility Email on Record	NCF-0946 / 11/30/2009	

Licensed Beds Nursing Home 38 Institutional Nursing Home 0

Certifications:None

HEARTLAND OF COLUMBIA REHABILITATION & NURSING CENTER	Richland / Limited Liability	132
2601 FOREST DR	2601 FOREST DR	
COLUMBIA, SC 29204-2363 FAC.#:803-256-4983	COLUMBIA, SC 29204-2363	
KRIEL, VALDEKO PH#:	COLUMBIA REHABILITATION AND NURSING CENTER - COLUMBIA SC LLC	
Facility Email: 512ADMIN@HCR-MANORCARECOM	NCF-0316 / 12/31/2009	

Licensed Beds Nursing Home 132 Institutional Nursing Home 0

Certifications:None

HERITAGE AT LOWMAN REHABILITATION AND HEALTHCARE	Richland / Non-Profit Corporation	176
201 FORTRESS DR	PO BOX 444	
WHITE ROCK, SC 29177 FAC.#:803-732-3000	WHITE ROCK, SC 29177-0444	
YETTER, MELISSA T PH#: 803-732-3000	LUTHERAN HOMES OF SOUTH CAROLINA INC	
Facility Email: MYETTER@LHOMES.ORG	NCF-0688 / 05/31/2010	

Licensed Beds Nursing Home 129 Institutional Nursing Home 47

Certifications:None

County: Richland

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
LIFE CARE CENTER OF COLUMBIA 2514 FARAWAY DR COLUMBIA, SC 29223-3969 FAC.#:803-865-1999 JEROME, MARGARET K PH#: Facility Email: LCCA.COM	Richland / Corporation 2514 FARAWAY DR COLUMBIA, SC 29223-3969 RCM-COLUMBIA INC NCF-0634 / 06/30/2010	179
Licensed Beds	Nursing Home 179 Institutional Nursing Home 0	
Certifications:Alzheimer Unit, Alzheimers Care		
MAGNOLIA MANOR-COLUMBIA 1007 N KINGS WAY COLUMBIA, SC 29223-1916 FAC.#:803-699-4111 SKEHAN, CAROL L PH#: 803-936-0062 Facility Email: KEITH.PAUL@THICARE.COM	Richland / Ltd. Liability 1007 N KINGS WAY COLUMBIA, SC 29223-1916 THI OF SOUTH CAROLINA AT COLUMBIA LLC NCF-0868 / 08/31/2010	88
Licensed Beds	Nursing Home 88 Institutional Nursing Home 0	
Certifications:None		
NHC HEALTHCARE PARKLANE 7601 PARKLANE RD COLUMBIA, SC 29223-6122 FAC.#:803-741-9090 ARGO, MELISSA B PH#: 803-741-9090 Facility Email: MARGO@SC.RR.COM	Richland / Ltd. Liability PO BOX 25548 COLUMBIA, SC 29224-5548 NHC HEALTHCARE/PARKLANE LLC NCF-0797 / 06/30/2010	180
Licensed Beds	Nursing Home 180 Institutional Nursing Home 0	
Certifications:Alzheimer Unit, Alzheimers Care		
PALMETTO HEALTH BAPTIST SUBACUTE REHABILITATION CENTER 1330 TAYLOR ST COLUMBIA, SC 29201-2943 FAC.#:803-296-5010 SEIGLER, CAROLINE N PH#: 803-296-5010 Facility Email: No Facility Email on Record	Richland / Non-Profit Corporation 1330 TAYLOR ST COLUMBIA, SC 29201-2943 PALMETTO HEALTH NCF-0740 / 02/28/2010	22
Licensed Beds	Nursing Home 0 Institutional Nursing Home 22	
Certifications:None		
RICE NURSING HOME 100 FINLEY RD COLUMBIA, SC 29203-9264 FAC.#:803-691-5720 LILLY, ORPHA LORETTA PH#: 803-691-5740 Facility Email: No Facility Email on Record	Richland / Non-Profit Corporation 100 FINLEY RD COLUMBIA, SC 29203-9264 LUTHERAN HOMES OF SOUTH CAROLINA INC NCF-0831 / 05/31/2010	32
Licensed Beds	Nursing Home 32 Institutional Nursing Home 0	
Certifications:None		

County: Richland

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

UNIHEALTH POST ACUTE CARE-COLUMBIA	Richland / Limited Liability	257
2451 FOREST DR	2451 FOREST DR	
COLUMBIA, SC 29204-2026 FAC.#:803-254-5960	COLUMBIA, SC 29204-2026	
HUGHES, BRENDA S PH#: 864-378-0560	UNIHEALTH POST ACUTE CARE-COLUMBIA LLC	
Facility Email: BHUGHES@UHS-PRUITT.COM	NCF-0880 / 01/31/2010	

Licensed Beds Nursing Home 257 Institutional Nursing Home 0

Certifications:Alzheimer Unit, Alzheimers Care

WHITE OAK MANOR-COLUMBIA	Richland / Corporation	120
3001 BEECHAVEN RD	PO BOX 4276	
COLUMBIA, SC 29204-2701 FAC.#:803-782-4363	COLUMBIA, SC 29240-4276	
NEAL, MICHAEL S PH#: 803-782-4363	WHITE OAK MANOR-COLUMBIA INC	
Facility Email: SNEAL@WHITEOAKMANOR.COM	NCF-0886 / 12/31/2009	

Licensed Beds Nursing Home 120 Institutional Nursing Home 0

Certifications:None

WILDEWOOD DOWNS NURSING AND REHABILITATION CENTER	Richland / Ltd. Liability	80
731 POLO RD	731 POLO RD	
COLUMBIA, SC 29223-4462 FAC.#:803-788-5115	COLUMBIA, SC 29223-4462	
ABERNATHY, EVA MAE PH#: 803-788-5115	WILDWOOD DOWNS RETIREMENT LLC	
Facility Email: No Facility Email on Record	NCF-0914 / 12/31/2009	

Licensed Beds Nursing Home 72 Institutional Nursing Home 8

Certifications:None

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	13
Number Licensed Units	1,864

Number of Activities/Facilities licensed in county of	Richland	# Lics	13
	Number Licensed Units :	1,864	

County: Saluda

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

SALUDA NURSING CENTER	Saluda / County	176
581 NEWBERRY HWY	PO BOX 398	
SALUDA, SC 29138-0398 FAC.#:864-445-2146	SALUDA, SC 29138-0398	
BOWLES, ROBERT F PH#: 864-445-2146	SALUDA COUNTY	
Facility Email: RBOWLES@EMBARQMAIL.COM	NCF-0265 / 06/30/2010	

Licensed Beds Nursing Home 176 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="176"/>
Number of Activities/Facilities licensed in county of	Saluda	# Lics	1
	Number Licensed Units :	176	

County: Spartanburg

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

CAMP CARE	Spartanburg / Ltd. Liability	88
59 BLACKSTOCK RD	59 BLACKSTOCK RD	
INMAN, SC 29349-1827 FAC.#:864-472-2028	INMAN, SC 29349-1827	
COTHRAN, WADETTE S PH#: 864-472-2028	THI OF SOUTH CAROLINA AT CAMP CARE LLC	
Facility Email: WADETTE.COTHRAN@THICARE.COM	NCF-0862 / 08/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

GOLDEN AGE-INMAN	Spartanburg / Ltd. Liability	44
82 N MAIN ST	82 N MAIN ST	
INMAN, SC 29349-1416 FAC.#:864-472-6636	INMAN, SC 29349-1416	
JOHNSON, TIMOTHY A PH#: 864-472-6636	THI OF SOUTH CAROLINA AT GOLDEN AGE-INMAN LLC	
Facility Email: TIMOTHY.JOHNSON@THICARE.COM	NCF-0857 / 08/31/2010	

Licensed Beds Nursing Home 44 Institutional Nursing Home 0

Certifications:None

INMAN HEALTHCARE	Spartanburg / Corporation	40
51 N MAIN ST	51 N MAIN ST	
INMAN, SC 29349-1437 FAC.#:864-472-9370	INMAN, SC 29349-1437	
KILPATRICK, LYNN D PH#:	THI OF SOUTH CAROLINA AT INMAN LLC	
Facility Email: LYNN.KILPATRICK@THICARE.COM	NCF-0864 / 08/31/2010	

Licensed Beds Nursing Home 40 Institutional Nursing Home 0

Certifications:None

MAGNOLIA MANOR-INMAN	Spartanburg / Ltd. Liability	176
63 BLACKSTOCK RD	63 BLACKSTOCK RD	
INMAN, SC 29349-1849 FAC.#:864-472-9055	INMAN, SC 29349-1849	
LYLES, DALE M PH#: 864-472-9055	THI OF SOUTH CAROLINA AT MAGNOLIA MANOR-INMAN LLC	
Facility Email: No Facility Email on Record	NCF-0863 / 08/31/2010	

Licensed Beds Nursing Home 176 Institutional Nursing Home 0

Certifications:None

MAGNOLIA MANOR-SPARTANBURG	Spartanburg / Ltd. Liability	95
375 SERPENTINE DR	375 SERPENTINE DR	
SPARTANBURG, SC 29303-3026 FAC.#:864-585-0218	SPARTANBURG, SC 29303-3026	
HARPER, DAVID S PH#: 864-594-5116	THI OF SOUTH CAROLINA AT SPARTANBURG LLC	
Facility Email: No Facility Email on Record	NCF-0867 / 08/31/2010	

Licensed Beds Nursing Home 95 Institutional Nursing Home 0

Certifications:None

County: Spartanburg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MAGNOLIA PLACE AT SPARTANBURG 8020 WHITE AVE SPARTANBURG, SC 29303-2099 FAC.#:864-542-8515 HARRIS, PATRICIA A PH#: 864-542-8515 Facility Email: PATRICIA.HARRIS@THICARE.COM	Spartanburg / Ltd. Liability 8020 WHITE AVE SPARTANBURG, SC 29303-2099 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT SPARTANBURG LLC NCF-0861 / 08/31/2010	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		
Certifications:None		
MOUNTAINVIEW NURSING HOME 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 FAC.#:864-582-4175 DILLARD, WILSON K PH#: 864-582-4175 Facility Email: WDILLARD@MOUNTAINVIEWNH.COM	Spartanburg / Corporation 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 COMMUNITY SERVICES FOR THE AGING INC NCF-0149 / 06/30/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		
ROSECREST REHABILITATION AND HEALTHCARE 200 FORTRESS DR INMAN, SC 29349-9160 FAC.#:864-599-8600 MILLER, RICHARD P PH#: 803-581-3151 Facility Email: RMILLER@ROSECRESTORG	Spartanburg / Non-Profit Corporation 200 FORTRESS DR INMAN, SC 29349-9160 LUTHERAN HOMES OF SOUTH CAROLINA INC NCF-0817 / 04/30/2010	75
Licensed Beds Nursing Home 75 Institutional Nursing Home 0		
Certifications:Alzheimer Unit, Alzheimers Care		
SKYLYN HEALTH CENTER 1705 SKYLYN DR OFC SPARTANBURG, SC 29307-1090 FAC.#:864-582-6838 BARRESI, TIMOTHY J PH#: 864-582-6838 Facility Email: No Facility Email on Record	Spartanburg / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1031 EMERITUS CORPORATION NCF-0700 / 01/31/2010	44
Licensed Beds Nursing Home 33 Institutional Nursing Home 11		
Certifications:None		
SPARTANBURG HOSPITAL FOR RESTORATIVE CARE SNF 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 FAC.#:864-560-3232 STIMAC, PATRICIA M PH#: 864-560-3232 Facility Email: PSTIMAC@SRHSCOM	Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC NCF-0915 / 02/28/2010	25
Licensed Beds Nursing Home 25 Institutional Nursing Home 0		
Certifications:None		

County: Spartanburg**Facility Type: Nursing Home**

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

SUMMIT HILLS SKILLED NURSING FACILITY	Spartanburg / Ltd. Liability	33
100 SUMMIT HILLS DR	100 SUMMIT HILLS DR	
SPARTANBURG, SC 29307-1532 FAC.#:864-591-2222	SPARTANBURG, SC 29307-1532	
GOODWIN, ANNETTE SMITH PH#: 864-591-2222	SUMMIT HILLS LLC	
Facility Email: ATHOMAS@SUMMIT-HILLSCOM	NCF-0950 / 03/31/2010	

Licensed Beds Nursing Home 27 Institutional Nursing Home 6

Certifications:None

VALLEY FALLS TERRACE	Spartanburg / Corporation	88
400 LOCUST GRV	400 LOCUST GRV	
SPARTANBURG, SC 29303-4831 FAC.#:864-503-0377	SPARTANBURG, SC 29303-4831	
HORNE, LINDA A PH#: 864-503-0377	VALLEY FALLS TERRACE INC	
Facility Email: LAHVFT@HOTMAIL.COM	NCF-0495 / 08/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:Alzheimer Care

WHITE OAK ESTATES	Spartanburg / Corporation	88
400 WEBBER RD	400 WEBBER RD	
SPARTANBURG, SC 29307-2400 FAC.#:864-579-7004	SPARTANBURG, SC 29307-2400	
CATLETT, GARY D PH#: 864-579-7004	WHITE OAK ESTATES INC	
Facility Email: GCATLETT@WHITEOAKMANOR.COM	NCF-0888 / 12/31/2009	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

WHITE OAK MANOR-SPARTANBURG	Spartanburg / Corporation	192
295 E PEARL ST	PO BOX 4887	
SPARTANBURG, SC 29303-3666 FAC.#:864-585-0241	SPARTANBURG, SC 29305-4887	
NELSON, ANDREW R PH#: 864-573-0106	WHITE OAK MANOR-SPARTANBURG INC	
Facility Email: RROUBY@WHITEOAKMANOR.COM	NCF-0889 / 12/31/2009	

Licensed Beds Nursing Home 192 Institutional Nursing Home 0

Certifications:None

WOODRUFF MANOR	Spartanburg / Ltd. Liability	88
1114 E GEORGIA RD	PO BOX 879	
WOODRUFF, SC 29388-9350 FAC.#:864-476-7092	WOODRUFF, SC 29388-0879	
TAYLOR, KEITH PH#:	WOODRUFF MANOR LLC	
Facility Email: ADMINISTRATOR@WOODRUFFMANOR.COM	NCF-0823 / 09/30/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:Alzheimer Care

County: Spartanburg

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	15
Number Licensed Units	1,296

Number of Activities/Facilities licensed in county of	Spartanburg	# Lics	15
	Number Licensed Units :	1,296	

County: Sumter

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

COVENANT PLACE NURSING CENTER	Sumter / Non-Profit Corporation	44
2825 CARTER RD OFC	2825 CARTER RD OFC	
SUMTER, SC 29150-1736 FAC.#:803-469-7007	SUMTER, SC 29150-1736	
LINDER SR, RISLEY E PH#: 803-469-7007	COVENANT PLACE OF SUMTER INC	
Facility Email: RLINDER@COVENANTPLACE.ORG	NCF-0632 / 05/31/2010	

Licensed Beds Nursing Home 0 Institutional Nursing Home 44

Certifications:Alzheimer Unit, Alzheimers Care

HOPEWELL HEALTH CARE CENTER	Sumter / Corporation	96
1761 PINWOOD RD	1761 PINWOOD RD	
SUMTER, SC 29154-9056 FAC.#:803-481-8591	SUMTER, SC 29154-9056	
BURNS, ROBERT W PH#:	HP/HOPEWELL INC	
Facility Email: No Facility Email on Record	NCF-0745 / 10/31/2010	

Licensed Beds Nursing Home 96 Institutional Nursing Home 0

Certifications:None

NHC HEALTHCARE SUMTER	Sumter / Corporation	138
1018 N GUIGNARD DR	PO BOX 1524	
SUMTER, SC 29150-2423 FAC.#:803-773-5567	SUMTER, SC 29150-1524	
CROTTS, JEANIE S PH#: 803-773-5567	NATIONAL HEALTH CORPORATION	
Facility Email: JCROTTS@NHCSUMTER.COM	NCF-0471 / 01/31/2010	

Licensed Beds Nursing Home 138 Institutional Nursing Home 0

Certifications:None

SUMTER EAST HEALTH AND REHABILITATION CENTER	Sumter / Ltd. Liability	176
880 CAROLINA AVE	880 CAROLINA AVE	
SUMTER, SC 29150-2815 FAC.#:803-775-5394	SUMTER, SC 29150-2815	
HATTON, BRYAN C PH#: 803-775-5394	SSC SUMTER EAST OPERATING COMPANY LLC	
Facility Email: No Facility Email on Record	NCF-0919 / 09/30/2010	

Licensed Beds Nursing Home 176 Institutional Nursing Home 0

Certifications:None

TUOMEY SUBACUTE SKILLED CARE PROGRAM	Sumter / Non-Profit Corporation	18
129 N WASHINGTON ST	129 N WASHINGTON ST	
SUMTER, SC 29150-4983 FAC.#:803-774-9000	SUMTER, SC 29150-4983	
MCMASTER, KATHY P PH#: 803-774-9000	TUOMEY INC	
Facility Email: KATHY.MCMASTER@TUOMEY.COM	NCF-0698 / 02/28/2010	

Licensed Beds Nursing Home 18 Institutional Nursing Home 0

Certifications:None

County: Sumter

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	5
Number Licensed Units	472

Number of Activities/Facilities licensed in county of	Sumter	# Lics	5
	Number Licensed Units :	472	

County: Union

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ELLEN SAGAR NURSING HOME 1817 JONESVILLE HWY UNION, SC 29379-9793 FAC.#:864-466-0350 WINN, ANNE O PH#: 864-427-5187 Facility Email: ESNHADMIN@BELLSOUTH.NET	Union / District 1817 JONESVILLE HWY UNION, SC 29379-9793 UNION HOSPITAL DISTRICT NCF-0217 / 11/30/2009	113
Licensed Beds Nursing Home 113 Institutional Nursing Home 0		

Certifications:None

OAKMONT OF UNION 709 RICE AVE EXT UNION, SC 29379-9023 FAC.#:864-427-0306 FREEMAN, PATRICIA A PH#: 864-427-0306 Facility Email: 4031ADMIN@HCR-MANORCARE.COM	Union / Limited Liability 709 RICE AVE EXT UNION, SC 29379-9023 OAKMONT OF UNION SC LLC NCF-0443 / 12/31/2009	88
Licensed Beds Nursing Home 88 Institutional Nursing Home 0		

Certifications:None

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	2	Number Licensed Units 201
Number of Activities/Facilities licensed in county of	Union	# Lics 2
	Number Licensed Units :	201

County: Williamsburg

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

KINGSTREE NURSING FACILITY	Williamsburg / Corporation	96
401 NELSON BLVD	401 NELSON BLVD	
KINGSTREE, SC 29556-4024 FAC.#:843-355-6116	KINGSTREE, SC 29556-4024	
SLAVINSKI, CANDICE J PH#: 843-355-6116	KINGSTREE NURSING FACILITY INC	
Facility Email: CSLAVINSKI@COOKEASSOCIATESCOM	NCF-0937 / 12/31/2009	

Licensed Beds Nursing Home 96 Institutional Nursing Home 0

Certifications:None

Totals For Facility/License Type Nursing Home			
Number of Activities/Facilities licensed:	<input type="text" value="1"/>	Number Licensed Units	<input type="text" value="96"/>
Number of Activities/Facilities licensed in county of	Williamsburg	# Lics	1
	Number Licensed Units :	96	

County: York

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AGAPE REHABILITATION OF ROCK HILL 159 SEDGEWOOD DR ROCK HILL, SC 29732-2315 FAC.#:803-329-6565 HENDERSON, DANIELLE B PH#: 803-329-6565 Facility Email: No Facility Email on Record	York / Ltd. Liability 159 SEDGEWOOD DR ROCK HILL, SC 29732-2315 EBENEZER SENIOR SERVICES LLC NCF-0814 / 02/28/2010	99
Licensed Beds Nursing Home 99 Institutional Nursing Home 0		
Certifications:Alzheimer Care		
MAGNOLIA MANOR-ROCK HILL 127 MURRAH DR ROCK HILL, SC 29732-2390 FAC.#:803-328-6518 HENSCHER, THOMAS W PH#: 803-366-7133 Facility Email: DANA.STEELE@THICARECOM	York / Ltd. Liability 127 MURRAH DR ROCK HILL, SC 29732-2390 THI OF SOUTH CAROLINA AT ROCK HILL LLC NCF-0859 / 08/31/2010	106
Licensed Beds Nursing Home 106 Institutional Nursing Home 0		
Certifications:None		
UNIHEALTH POST ACUTE CARE-ROCK HILL 261 S HERLONG AVE ROCK HILL, SC 29732-1159 FAC.#:803-366-7133 MARKUSZKA, THOMAS PH#: Facility Email: BPARRIS@UHS-PRUITT.COM	York / Limited Liability 261 S HERLONG AVE ROCK HILL, SC 29732-1159 UNIHEALTH POST ACUTE CARE-ROCK HILL LLC NCF-0947 / 01/31/2010	132
Licensed Beds Nursing Home 132 Institutional Nursing Home 0		
Certifications:None		
WESTMINSTER HEALTH AND REHABILITATION CENTER 831 MCDOW DR ROCK HILL, SC 29732-2415 FAC.#:803-326-3100 STAMPER, AMANDA L PH#: Facility Email: MSTAMPER@WESTMINSTERTOWERS.ORG	York / Non-Profit Corporation 831 MCDOW DR ROCK HILL, SC 29732-2415 WESTMINSTER PRESBYTERIAN CENTER INC NCF-0819 / 08/31/2010	66
Licensed Beds Nursing Home 66 Institutional Nursing Home 0		
Certifications:None		
WHITE OAK MANOR-ROCK HILL 1915 EBENEZER RD ROCK HILL, SC 29732-1097 FAC.#:803-366-8155 ALEXANDER, JANE G PH#: 803-366-8155 Facility Email: JALEXANDER@WHITEOAKMANOR.COM	York / Corporation 1915 EBENEZER RD ROCK HILL, SC 29732-1097 WHITE OAK MANOR-ROCK HILL INC NCF-0885 / 12/31/2009	141
Licensed Beds Nursing Home 141 Institutional Nursing Home 0		
Certifications:None		

County: York

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
WHITE OAK MANOR-YORK 111 S CONGRESS ST YORK, SC 29745-1836 FAC.#:803-684-0035 GIBBS, TAMMY L PH#: 803-684-0035 Facility Email: TGIBBS@WHITEOAKMANOR.COM	York / Corporation PO BOX 629 YORK, SC 29745-0629 WHITE OAK MANOR-YORK INC NCF-0887 / 12/31/2009	109
Licensed Beds Nursing Home 109 Institutional Nursing Home 0		

Certifications:None

WILLOW BROOK COURT AT PARK POINTE VILLAGE 2993 VAN VALIN DR ROCK HILL, SC 29732-8079 FAC.#:803-327-4723 PETTY, JIM PH#: 803-327-4723 Facility Email: JPETTY@ACTSLIFE.ORG	York / Corporation 2993 VAN VALIN DR ROCK HILL, SC 29732-8079 PARK POINTE VILLAGE INC NCF-0916 / 07/31/2010	40
Licensed Beds Nursing Home 40 Institutional Nursing Home 0		

Certifications:Alzheimer Care

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed:	7	Number Licensed Units 693
Number of Activities/Facilities licensed in county of York		# Lics 7
	Number Licensed Units :	693

Report Total

Total Number of Activities/Facilities licensed 195 Total Number Licensed Units 19,889